Sixty-Third Annual Report

of the

Director of Public Health for the Government of Bombay

For the Year 1926

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With Appendices

including the

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ANNUAL SANITARY REPORT, 1926

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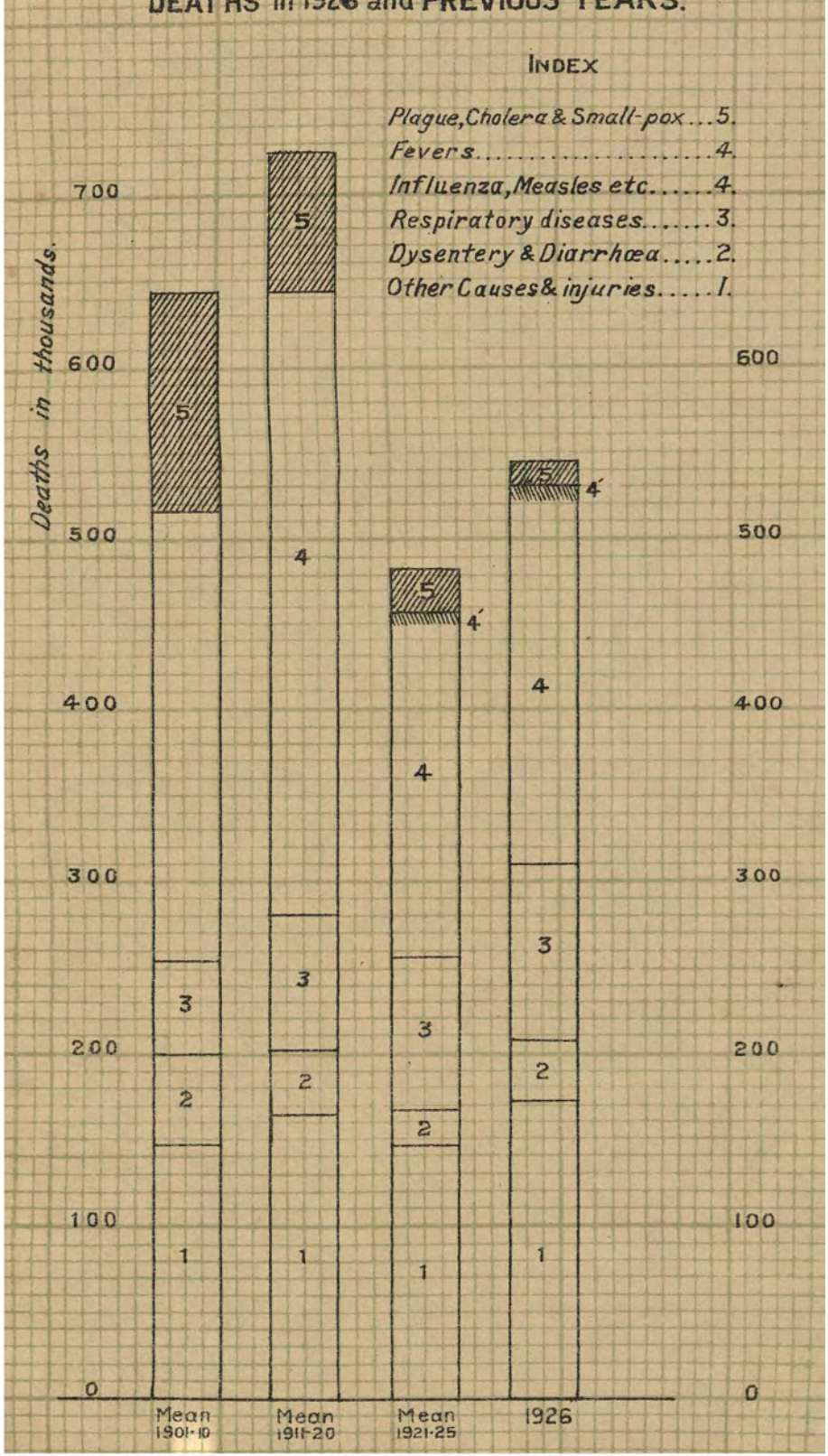
CHART I

DEATHS in 1926 and PREVIOUS YEARS.



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ANNUAL SANITARY REPORT FOR 1926

Sections I to IV—No remarks

SECTION V

General Population and Vital Statistics

Note.—The birth and death ratios are calculated on the census population of 1921 :—Europeans 19,247 ; Anglo-Indians 10,221 ; Indians 19,165,614 ; total population of the Bombay Presidency—19,195,082.

1. *Europeans.*—246 births and 203 deaths were recorded against 278 and 210 in 1925 equal to a birth-rate of 12·78 per mille against 14·44 in 1925 and a death-rate of 10·55 against 10·91. Of the births, 143 were males and 103 females against 157 and 121 in 1925 and the deaths were 133 males and 70 females against 141 and 69. Of the deaths, three were due to Small-pox, 29 to fevers, 25 to dysentery and diarrhœa, 23 to respiratory diseases, 9 to injuries and 114 to other causes as compared with 6, 33, 23, 32, 16 and 100, respectively, in the previous year.

2. *Anglo-Indians.*—288 births and 250 deaths were registered against 227 and 209 in 1925. The birth and death ratios per mille for the year were, therefore, 28·18 and 24·46 respectively compared with 22·21 and 20·44 in 1925. Of the births, 159 were males and 129 females against 121 and 106 in 1925 while of the deaths, 129 were males and 121 females against 104 and 105 in the previous year. Of the 250 deaths, 8 were due to injuries, 38 to dysentery and diarrhœa, 40 to fevers, 61 to respiratory diseases and 102 to all other causes against 2, 18, 33, 51 and 104, respectively, in 1925. As regards epidemic diseases only one death was recorded from Small-pox.

The increase in the number of deaths occurred chiefly in Bombay City where 98 male and 85 female deaths were recorded against 77 and 79, respectively, in 1925. Fever caused 32 deaths, dysentery and diarrhœa 27, respiratory diseases 47 and other causes 70 against 23, 16, 37 and 79, respectively, in the previous year.

As 59 per cent. of the European and 46 per cent. of the Anglo-Indian population of the whole Presidency live in Bombay City, any variation in the city death-rate is reflected in that of the Presidency.

3. *Registration areas and Indian Civil population.*—The Presidency is divided into 5 Registration Districts comprising 28 Collectorates (including Bombay City), 250 Rural Circles (Taluka and Mahal), 106 Town Circles and 9 Cantonments. Seven Cantonments in Native States also submit returns. These divisions are shown in the Annual Forms in Appendix III to this Report.

The 1921 Census showed the Indian population including Sind as 19,165,614. The population of the Rural Circles was 15,421,829. Town Circles 3,663,048, Cantonments in British Territory 80,737 and Cantonments in Native States 111,391 persons.

Births

4. The year 1926 shows the highest number of births recorded since 1916. The total number of births registered was 710,135 showing an

increase of 45,751 over the figure for 1925 and also of 66,397 on the decennial mean figure—643,738. The number of births recorded in previous years and the corresponding birth-rates are as follows :—

Year	Births	Birth-rate	Year	Births	Birth-rate
1901-1910 mean..	617,736	33·42	1919	.. 546,460	27·90
1911 ..	705,090	36·00	1920	.. 593,175	30·28
1912 ..	684,890	34·97	1921	.. 624,640	32·59
1913 ..	684,803	34·96	1922	.. 620,770	32·39
1914 ..	733,076	37·43	1923	.. 681,910	35·58
1915 ..	726,780	37·10	1924	.. 682,321	35·60
1916 ..	704,672	35·98	1925	.. 664,384	34·66
1917 ..	699,823	35·73	1926	.. 710,135	37·05
1918 ..	619,224	31·61			

It will be noted that the birth-rate suffered a severe set-back by the influenza pandemic of 1918 deleting as it did the younger women more especially. This set-back in births has all but recovered as the above table shows.

The increase as compared with the previous year is shared by all the Registration Districts—Central 14,879, Southern 13,563, Sind 12,137, Gujarat 2,719 and Western 1,693. Bombay City also shows an increase of 760 over the previous year's figure—19,944.

5. The birth-rate for the year for the Presidency as a whole was 37·05 against 34·66 during the previous year. For the Presidency proper excluding Bombay City and Sind the rate was 41·35 against 39·12 and for the Province of Sind 24·30 against 20·58 in 1925. The rates recorded in other parts of India for the last 2 years are given below and it will be seen that an increase in the birth-rate was general throughout India, except in Bengal :—

	1926	1925		1926	1925
Madras ..	36·10	33·71	Bihar and Orissa ..	37·28	35·63
Bengal ..	27·43	29·60	United Provinces ..	34·20	32·73
Assam ..	30·82	29·08	Punjab ..	41·65	40·06
Burma ..	27·59	25·38	Central Provinces ..	46·03	43·90

In the Central Registration District, Ahmednagar Collectorate returned the highest rate (49·20) and the Poona District the lowest (34·49). Sholapur, Satara and Ratnagiri showed an increase. At the time of the Census, 1921, the population in Ahmednagar District was very much reduced in consequence of people having left the district on account of the 1920 famine. The people having since returned, the birth-rate has recovered.

In the Western Registration District, the birth-rate in 1926 when compared to the year previous shows a rise in Thana, Bombay Suburban and Kolaba—the Konkan Districts, and a fall in East Khandesh, West Khandesh and Nasik Districts—the Deccan Districts.

In the Guzerat Registration District, the birth-rate of 1926 when compared with the ratios recorded in 1925 shows an increase of 1·68,

4·09 and 2·20 in Surat, Broach and Ahmedabad Districts, respectively, while Kaira and Panch Mahals show a decrease of 1·49 and 1·51 respectively. Broach District recorded the highest birth-rate in 1926 during the last 10 years. The birth-rate in Ahmedabad (except in 1917) and in Surat (except in 1917 and 1924) also was the highest recorded during the past ten years.

In the Southern Registration District, Belgaum and Dharwar which in the previous year had shown a drop in the birth-rate have now largely recovered their position and vitality. Bijapur has admirably maintained the upward tendency of its birth-rate. The birth-rate in Kanara District has shown an appreciable rise of 3·47 over the percentage of the last year. This rise was shared by almost all the talukas including those that are usually affected by malaria.

In the Sind Registration District, the largest increase is shown in Thar and Parkar District by 3,057 and the lowest in Upper Sind Frontier by 205. The increase is partly explained by the improved economic conditions during the year but is largely due to the greatest care taken in registration of vital statistics by the Revenue Authorities as a result of the endeavours of the Public Health Department.

The Thar and Parkar District shows a marked improvement having as many as 3,057 more births recorded during the year in spite of the great scarcity which prevailed in the Desert Division of this District. This improvement is due to more accurate registration for which the Public Health Department is indebted to the Collector, Mr. C. G. Henderson, I.C.S., whose personal interest in all matters which concern Public Health has brought about these results.

6. In the Presidency as a whole, the birth-rate for rural areas was 39·04 and for urban areas 28·88 against 36·52 and 27·00, respectively, in 1925. For the Presidency proper excluding both Sind and Bombay City the rural birth-rate was 42·82 and the urban 32·47 against 40·61 and 30·14, respectively, in 1925.

Of the 27 districts in the Presidency the highest birth-rate was recorded in Ahmednagar (49·20) and the lowest (17·94) in Hyderabad. Thirteen returned a birth-rate of 40 or more per mille of population, *viz.*, Broach (48·95), West Khandesh (48·29), East Khandesh (46·67), Sholapur (45·44), Nasik (44·62), Bijapur (43·39), Belgaum (43·05), Satara (42·14), Kolaba (41·28), Surat (41·09), Ahmedabad (40·42), Panch Mahals (40·23) and Ratnagiri (40·17). Bombay Suburban District has recorded rate under 20 per mille. This low birth-rate in the Bombay Suburban District is accounted for by the fact that a large section of the population of this district is made up of workers in Bombay City who are residents of different parts of the Presidency and whose wives are, almost invariably, sent to their native places for confinement.

7. Of the 189 talukas, pethas and mahals in the Presidency proper, 164 or as many as 87 per cent. returned birth-rates over 35 per mille of population—31 of these areas yielding figures above 50, and 93 areas figures

between 40 and 50 per mille. The rates varied from 80·59 in Pathardi in Ahmednagar and 67·19 in Nandgaon of the Nasik District to as low a figure as 19·21 in South Salsette and 15·99 in Poona City taluka. Amongst others showing low rates the following six talukas comprising 3 per cent. of the total, returned birth-rates below 30 per mille of population, *viz.*, Bassein (29·33) in Thana District, Mawal (26·75) in Poona, Malcolmpeth (23·84) in Satara, Sirsi (29·48), Yellapur (27·69) and Supa (23·75) in Kanara District.

8. Out of 86 urban areas in the Presidency proper, 17 returned birth-rate exceeding 40. In general the Guzerat towns show the highest rate, *e.g.*, Borsad (55·81), Jambusar (53·73), Dholka (51·94), Umreth (49·06), Godhra (46·28), Ankleshwar (45·25), Dhandhuka (45·05), Ahmedabad (42·47), Broach (41·87), Kapadvanj (41·30) and Mehmedabad (41·21). Besides these, outside Guzerat, there are six towns in the Presidency which returned a birth-rate of over 40 per 1,000, *viz.*, Nasirabad (51·85), Guledgud (46·74), Sholapur (42·92), Ranebennur (41·64), Bagalkot (40·47) and Erandol (40·27).

Thirty-one towns recorded birth-rates between 30 and 40 per mille of population and 26 towns showed rates between 20 and 30.

In the remaining 12 towns the recorded birth-rates were under 20; amongst the lowest being Uran (13·77), Thana (15·82), Panwel (16·12), Manmad (18·11), Igatpuri (18·14), Poona City (19·26), Mahad (19·32), Amalner (19·33), Poona Suburban (19·54), Karad (19·55), Satara (19·64) and Kurla (19·88).

As remarked in last year's report inefficiency in registration on the part of municipalities continues to be the chief factor in showing these inordinately low rates.

The births recorded in Bombay City were 20,704 which is 760 more than in the previous year and equivalent to a birth-rate of 18·02 or an increase of 0·66.

9. Sind recorded 79,249 births, an increase of 12,137 on the figures for 1925 and also an increase of 10,496 over the decennial mean ending 1925 and 9,080 over the decennial mean ending 1915. The birth-rate for the Province was 24·30 against 20·58 in 1925.

The birth-rate for rural areas was 21·69 and for urban areas 38·83 during the year under report as against 17·80 and 36·05, respectively, in the preceding year. As usual the urban birth-rate greatly exceeds the rural (in contrast to the Presidency where the reverse is invariably the case). This may be due to default in registration in rural areas as commented on in the previous reports.

Of the 61 talukas and mahals in Sind, 9 returned a birth-rate above 30 per 1,000 of population, *viz.*, Diplo (47·79), Sukkur (39·29), Nawabshah (38·91), Jamesabad (37·85), Manjhand (32·34), Garhiyasin (31·75), Ratedero (31·24), Dighri (30·83) and Kandiaro (30·17). Twenty-five returned rates between 20 and 30 and the rates for the remaining 27 or 44 per cent. of the total were all below 20 per mille of population.

Of these excessively low rates of 12 per mille and under were returned from 2 of the areas in Karachi District and from 3 of those in Hyderabad District. Tatta (7·95) and Ghorabary (5·06) have shown the poorest birth-rates. The unsettled condition of the population which migrates during the inundation season (May to October) to hilly tracts to escape from mosquitoes which are a pest during these months is another factor which contributes towards the low birth-rates in these talukas.

The efficiency of registration in the urban circles of Sind varies. Karachi (47·43), Sukkur (46·13), Hyderabad (44·64), Ratedero (44·56), and Larkana (43·78) show birth-rates exceeding 40 per mille for the year under report, 3 returned birth-rates between 30 and 40, 5 returned rates between 20 and 30 and the remaining 6 returned rates that indicate extreme default, *viz.*, Mirpurkhas (10·23), Kotri (14·21), Matiari (14·87), Sehwan (15·60), Tatta (18·77) and Jacobabad (19·85). These municipal towns have been constantly figuring in the previous annual reports as showing defective registration and the reasons for the default have also been mentioned. They are principally :—Insufficient attention paid by the Municipal executive and a fluctuating population.

10. *Births in Cantonments.*—Of the 9 Cantonments, Karachi (34·94), Nagar (24·00), Kirkee (14·27), Belgaum (10·61), Ahmedabad (16·61), show the highest rates, while for the remainder the figure was below 10, the lowest being recorded in Deolali.

11. *Births according to Sex.*—Out of 710,135 births, 368,823 were males and 341,312 females equal to ratios of 19·24 and 17·81 per mille of population, as compared with 346,373 and 318,011 and 18·07 and 16·59 in 1925. For every 100 female births, there were 108·06 male births, the previous year's figure being 108·92. The percentage of male to female births registered varied from 102·14 in Panch Mahals District to 135·15 in Upper Sind Frontier District. In all Sind Districts the percentage is very high.

12. *Still-births.*—11,550 still-births were registered or 1·63 for every 100 live births. The corresponding figures for 1925 were 10,862 and 1·63, respectively. The percentage of still-births to live births recorded varied from 0·23 for Ahmednagar District to 8·07 for the City of Bombay. For other areas, Kanara (5·16), Dharwar (3·21), Bijapur (3·01), Kolaba (2·77), Surat (2·76), Belgaum (2·37), Karachi (2·12) and Bombay Suburban (2·04) show the highest percentages.

13. In the Southern Registration District, omissions of 810 births and 126 deaths were discovered during the year under report by Inspectors and vaccinators against 868 and 164, respectively, in the preceding year of 1925. The omissions discovered were 346 births and 40 deaths in Belgaum, 267 and 33 in Dharwar, 108 and 13 in Bijapur and 89 and 40 in Kanara Districts. In the Guzerat Registration District, omissions of 418 births and 30 deaths were discovered against

333 and 8 respectively in 1925. In Sind, omissions of 1,230 births were discovered against 1,155 in 1925.

Deaths

14. The year under report shows an increase in the mortality over the previous year and also over the quinquennial mean. This rise is due to some extent to fevers, dysentery and diarrhœa and respiratory diseases and all other causes. Besides, it is also to be noted that the greater number of deaths amongst infants has largely contributed to swell the total mortality figure. The total number of deaths registered was 547,264 as compared with 453,563 in 1925 and 486,062 the quinquennial mean. Comparison is shown in graphic form at the beginning of this section. The totals for other years are shown in the following table :—

Year	Deaths	Year	Deaths
1901-1910 mean ..	639,483	1921	498,350
1911-1915 mean ..	539,836	1922	452,581
1916 ..	652,584	1923	496,244
1917 ..	798,406	1924	529,576
1918 ..	1,724,074	1925	453,563
1919 ..	637,170	1926	547,064
1920 ..	516,296		

15. The recorded death-rate for the whole Presidency works out to 28·55. The death-rate in 1925 was 23·66, the quinquennial mean being 25·36.

For other parts of India, the death-rates recorded are as under :—

	1926	1925		1926	1925
Madras ..	25·57	24·40	Bihar and Orissa ..	25·71	23·69
Bengal ..	24·74	24·90	Punjab	36·52	29·97
Assam ..	23·02	22·52	United Provinces ..	25·10	24·78
Burma ..	20·92	18·75	Central Provinces ..	34·33	27·27

It will be seen from the above table that an increase in the death-rate was general throughout India, except in Bengal which province also showed a fall in the birth-rate during the year.

Excluding Bombay City and Sind the death-rate for the Presidency was 30·68 against 24·84 in 1925.

The death-rate for rural and urban areas for the Presidency as a whole were 27·98 and 31·22 respectively against 22·84 and 27·04 in 1925.

Of the districts the highest death-rates were returned by Broach (41·61), Ahmedabad (36·52), Surat (35·21), Kaira (34·86), East Khandesh (36·84), and Nasik (33·21) and the lowest by Thana (22·17) and Bombay Suburban (19·78).

By Registration Districts, the increase in the number of deaths was as follows :—

Guzerat Registration District recorded the highest mortality during the year under report as compared with the previous year. This Registration District showed an increase of 31,451, Western 21,983,

Central 20,779, Southern 11,902 and Sind 7,583. Bombay City shows an increase of only three deaths over the previous year's figure—31,654.

16. Of 189 talukas, pethas and mahals in the Presidency proper 20 as compared with 4 in the previous year show death-rates exceeding 40 per mille of population. These are Shevgaon (51·40), Mundargi (48·55), Kod (46·69), Pathardi (46·58), Wagra (45·00), Amod (44·38), Jambusar (44·37), Nandgaon (44·34), Mundgod (43·82), Karad (43·75), Bhusawal (43·33), Sakri (43·14), Ankleshwar (42·92), Malegaon (42·42), Broach (42·01), Jamner (41·98), Jalgaon (41·33), Bankapur (41·09), Haliyal (40·79) and Edlabad (40·35). Twenty-three returned death-rates between 35 and 40 and 51 recorded rates between 30 and 35. Of the remaining 95, 89 recorded rates between 20 and 30 and only 6 returned rates below 20 per mille of population.

17. For urban areas death-rates varied between 51·98 for Ahmedabad city and 51·80 for Pandharpur town and 11·96 for Manmad and 15·17 for Amalner. Out of 86 urban registration circles in the Presidency proper, 15 returned death-rates over 40, *viz.*, Ahmedabad (51·98), Pandharpur (51·80), Surat (48·46), Nadiad (46·90), Jambusar (45·32), Borsad (44·00), Poona City (43·47), Nasirabad (43·24), Dhandhuka (43·20), Umreth (43·00), Dakore (42·18), Parola (40·81), Viramgaon (40·42), Yeola (40·54), and Barsi (40·05). Twenty returned rates between 30 and 40, 34 between 20 and 30 and the remaining 17 returned rates below 20.

18. *Corrected death-rate.*—The following table gives the death-rates in accordance with age and sex distribution for the Presidency proper and for the six towns for which such correction is possible :—

	Standard death-rate	Factor for correction	Recorded death-rate	Corrected death-rate
Presidency (excluding Bombay City and Sind)	39·8	1·0	30·68	30·68
Ahmedabad	37·6	1·06	51·98	55·10
Bombay City	28·6	1·39	27·56	38·31
Poona	37·0	1·08	43·47	46·95
Sholapur	39·4	1·01	34·96	35·31
Surat	39·0	1·02	48·46	49·43
Karachi	38·5	1·03	33·99	35·01

19. The returns of the chief cities may be briefly noted on as follows :—

Bombay.—Population 1,148,815. The registered deaths amounted to 31,657 as against 31,654 in 1925. The number of infantile deaths was 8,153 or a ratio of 393·79 per 1,000 registered births as against a rate of 359·05 in 1925. The chief causes of death shown in the returns were fevers, dysentery and diarrhœa and respiratory diseases—pneumonia and phthisis contributing a large number of deaths.

Ahmedabad.—Population 270,899. The registered deaths were 14,067 against 10,131 in 1925. The number of infantile deaths was 5,032 equal to a ratio of 437·76 per 1,000 registered births as against a rate of 322·74

in 1925. The total births of children registered numbered 11,425 giving a birth-rate of 42·47 per mille of population compared with 41·53 in 1925. The chief causes of death shown in the returns are fevers, measles, and respiratory diseases. The year 1926 recorded higher total mortality, month by month, as compared to the average, 1,489 deaths, the maximum being recorded in August. During the first half of the year the increase was due to an epidemic of measles which commenced from November 1925. This epidemic continued till June taking a heavy toll of infant and child life mainly due to fatal respiratory complications because of the neglect and want of any skilled medical treatment of cases of measles. Consequently an increased number of deaths was recorded under pneumonia and fevers and other respiratory diseases during the period. High birth-rate during the first half of the year also contributed in swelling the figure of mortality among infants which was higher than in 1925. The total deaths among infants—5,032 during 1926 formed nearly 28 per cent. of the total mortality of the city.

Poona.—Population 133,122. The total deaths registered amounted to 5,788 against 4,591 in 1925. Births registered were 2,565 equal to a birth-rate of 19·26 compared with 18·11 in the previous year. This shows some improvement in the registration of births. The chief causes of death shown in the returns were fevers, dysentery and diarrhœa and respiratory diseases—pneumonia and phthisis appear largely in the returns under the two latter headings. The number of infantile deaths was 1,879 or a ratio of 732·55 per 1,000 registered births as against a rate of 610·54 in 1925.

Karachi.—Population 199,014. The total deaths registered were 6,765 as compared with 5,506 in 1925. Fevers, dysentery and diarrhœa and respiratory diseases were among the chief causes of death. The infant mortality rate per 1,000 of births shows an increase from 222·29 to 252·70.

The general health conditions of the city during the second half of the year under report became far from satisfactory owing to heavy rains at the beginning of last September. This unprecedented (and unprovided) amount of rain caused an unusual amount of dysentery, diarrhœa, malaria and enteric fever in Karachi City and raised the mortality figures. The two quarters worst affected with enteric were the Lyari and Garden Quarter both of which received an unchlorinated drinking water supply.

The heavy rains also dislocated the conservancy arrangements and the decaying grain, etc., caused the city to be infested by flies to an extraordinary degree. The conditions were made worse by the bursting of the sewage mains.

An improvement in the health conditions set in about the middle of November 1926.

A special survey of the city was undertaken by the Director of Public Health (Lieut.-Colonel Melhuish, I.M.S.) in November and his recommendations were forwarded to the Commissioner in Sind.

Surat.—Population 117,428. The total deaths recorded were 5,691 as compared with 4,018 in 1925. The chief causes of death shown in the returns were small-pox, measles, malaria, dysentery and diarrhœa and respiratory diseases. The number of infantile deaths was 1,990 or a ratio of 452·89 per 1,000 registered births as against a rate of 330·39 in 1925. Infant mortality during the year was the heaviest recorded during the last 15 years. The climatic factors have affected Surat in common with other places causing increased mortality among infants and from diseases like dysentery and diarrhœa and respiratory diseases.

Sholapur.—Population 119,347. Total deaths show a decrease—4,172 as compared with 4,267. Fevers and respiratory diseases were amongst the chief causes of death. The birth-rate shows an increase from 34·24 to 42·92 per mille of population. The infant mortality rate per 1,000 registered births was 223·94 as against 232·24 in the previous year.

20. *Death-rate in Sind.*—Death-rate for Sind was 19·29 as compared with 16·96 in 1925 and 15·20 the quinquennial mean. The urban (29·97) greatly exceeds the rural death-rate (17·37) as in previous years. This is attributable to faulty registration in rural areas as has been commented on in previous reports. The urban death-rates ranged between 10·42 for Halla and 29·84 for Hyderabad and the rural death-rate between 5·46 for Tatta and 34·47 for Mirpurkhas talukas. Out of 19 urban circles in Sind 13 show a higher death-rate than that of the five years' mean. Of these, Hyderabad, Umarkot, Matiari, Kotri and Garhiyasin show a noticeable increase in the death-rate over the mean.

*The general rise in mortality is due in a great measure to the unusual weather conditions specially heavy rainfall and a severe winter. Consequently more deaths have occurred from diseases which are favoured by such conditions, Malaria has caused a greater mortality than usual in Matiari, Umarkot and Kotri, pneumonic fevers have also exacted a greater mortality. The Assistant Director of Public Health, Sind, reports "In Hyderabad City, enteric fever has been a very noticeable disease due apparently to the use of sewage for cultivating vegetables. In addition, other contributory causes are pneumonia, dysentery and diarrhœa. There are strong grounds for believing that the high incidence of these waterborne diseases was due to insufficient chlorination."

During my visit to Hyderabad last April, I found that the city water-supply was not being properly chlorinated and under my advice the Municipality deputed the Medical Officer of Health to the Public Health Laboratory at Karachi for a course of training in chlorination. It is hoped that as a result of this, greater attention is now being paid to regulating the dose of bleaching powder.

21. *Death-rate in Cantonments.*—The lowest death-rate 1·28 was recorded in Santacruz while Kirkee headed the list with a rate of 36·04 (as compared with 31·41 in the previous year). Respiratory diseases in the latter Cantonment were responsible for 146 deaths equal to a rate of 18·27 per mille of population. Of the 146 deaths from respiratory diseases, 74 were due to pneumonia, 30 to phthisis and 42 to other respiratory diseases. The death-rates recorded in other Cantonments

were Ahmedabad (24·64), Nagar (18·36), Belgaum (17·15), Karachi (15·60), Poona (11·14), Hyderabad (7·17), and Deolali (6·01).

22. *Births versus deaths.*—Over the Presidency as a whole, births exceeded deaths by 162,871 or a "natural increase" of 0·85 per cent. on the population compared with 1·10 per cent. for the year previous. In the Presidency excluding Sind and Bombay City the percentage of increase amounts to 1·07 as against 1·43. For Sind the figure is ·50. In Bombay City, on the other hand, deaths exceeded births by 10,953 or 0·95 per cent. of the City's population. Further details are given in Columns 6 and 9 of Annual Form No. II.

23. *Mortality according to sex.*—282,110 male and 265,154 female deaths were recorded giving death ratios per 1,000 of each sex of 28·07 and 29·08 respectively against 23·51 and 23·84 for 1925. For every 100 females 106·39 males died as compared with 108·70 in 1925. In Sind, the ratio of male to female deaths during the year was 120·41 to 100.

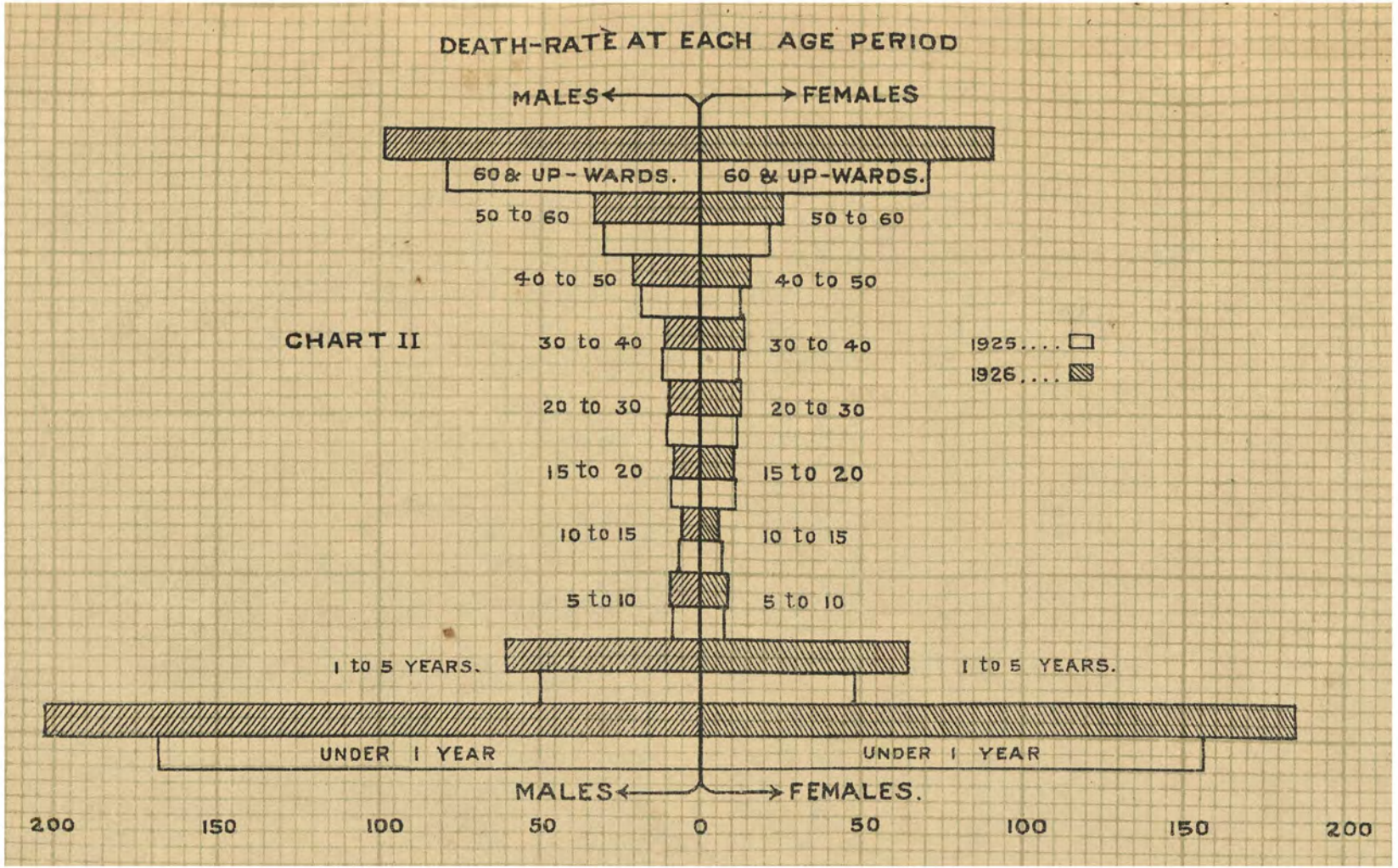
Infant Mortality

24. There were 138,213 deaths among infants under twelve months corresponding to a ratio of 194·63 per 1,000 registered births as against 107,634 or a ratio of 162·01 in 1925. The male and female rates were 203·43 and 185·12 respectively as compared with 167·69 and 155·81 in the previous year.

The improvement in these figures seen last year has again been set back during the year under report.

Infant mortality 1926, compared with previous years

Year	Deaths under 12 months			Births registered			Infant death-rate per 1,000 births			Infant deaths per 100 of total deaths
	Male	Female	Total	Male	Female	Total	Male	Female	Total	
1926 ..	75,030	63,183	138,213	368,823	341,312	710,135	203·43	185·12	194·63	25·26
1925 ..	58,086	49,551	107,634	346,373	318,011	664,384	167·69	155·81	162·01	23·73
1924 ..	70,489	59,950	130,439	353,631	327,690	682,321	198·77	182·95	191·17	24·63
1923 ..	59,228	49,684	108,912	354,890	327,020	681,910	166·89	151·93	159·76	21·95
1922 ..	57,130	47,841	104,971	323,631	297,139	620,770	176·53	161·01	169·10	23·19
1921 ..	60,231	51,023	111,254	325,751	298,889	624,640	184·90	170·71	178·11	22·32
1920 ..	59,236	49,440	108,676	309,463	283,712	593,175	191·42	174·26	183·21	19·36
1919 ..	58,950	51,398	110,348	285,195	261,265	546,460	206·70	196·73	201·93	17·32
1918 ..	94,553	83,124	177,677	322,546	296,678	619,224	293·14	280·17	286·93	10·32
1917 ..	79,984	71,649	151,633	363,460	336,362	699,822	220·06	213·01	216·67	18·09
1916 ..	75,328	65,304	140,632	365,057	339,615	704,672	206·34	192·29	199·57	21·58
1915 ..	67,440	57,569	125,009	376,930	349,850	726,780	178·92	164·55	172·00	24·43


DEATH-RATE AT EACH AGE PERIOD
MALES
FEMALES
60 & UP-WARDS.
60 & UP-WARDS.
50 to 60
50 to 60
40 to 50
40 to 50
CHART II
30 to 40
30 to 40
1925....
1926....
20 to 30
20 to 30
15 to 20
15 to 20
10 to 15
10 to 15
5 to 10
5 to 10
1 to 5 YEARS.
1 to 5 YEARS.
UNDER 1 YEAR
UNDER 1 YEAR
MALES
FEMALES.
200
150
100
50
0
50
100
150
200

Of the infants who died, 51,358 were in their first month of life (28,898 under and 22,460 over one week); 48,070 were over one month but not exceeding six months and the remainder 38,785 were between six months and twelve. The percentage of the total infant mortality under each of these three sub-groups works out to 37·16, 34·77 and 28·07 respectively.

The details of the average hundred infant deaths in each Registration District will be seen in the following table :—

District	Infantile deaths				
	In every 100 total deaths	Per 1,000 registered births	Not exceeding one month	1-6 months	6-12 months
Western	27·62	198·24	38·40	36·42	25·18
Central	25·37	172·94	37·11	35·95	26·94
Southern	21·29	158·07	43·3	35·7	21·0
Guzerat	26·97	235·35	31·30	36·42	32·28
Sind	23·31	185·11	38·07	27·89	34·04
Bombay City	25·75	393·79	35·84	27·51	36·65
Presidency	25·25	194·63	37·16	34·77	28·07

From the above table it will be seen that throughout the Presidency except Guzerat, mortality amongst infants was greatest in the first month of life.

The urban and rural infantile death-rates per 1,000 births for the Presidency as a whole were 300·56 and 175·61 respectively as compared with 258·47 and 144·69 in the previous year. The highest rural infantile death-rates was recorded in Broach (254·37) and the lowest in Ratnagiri (93·93). Among the larger towns the following return the highest rate :

Surat (453), Ahmedabad (438), Bombay City (394), Kurla (382), Nasik (342), Nadiad (334), Barsi (319), Hyderabad (286), Satara (279), Karachi (253), Shikarpur (248) and Sholapur (224).

Detailed figures are given in Annual Form No. VI (*a*).

The Assistant Director of Public Health, Sind, writes :—

"Karachi, Hyderabad, Nawabshah and Thar and Parkar Districts in Lower Sind recorded more deaths under one year during the year under report than in the preceding year. Small-pox, measles, dysentery and diarrhœa and respiratory diseases were the chief causes responsible for high infant mortality in these Districts. The increase may also be due to great number of births in these districts. Of all the principal towns in Sind, Hyderabad and Karachi returned the higher infant mortality during the year under report, while Shikarpur, Rohri, Larkana, Jacobabad and Sukkur show an

improvement over the year 1925. The cause of increase in Hyderabad and Karachi towns is mainly due to the prevalence of such diseases as small-pox and measles."

The Medial Officer of Health Hyderabad Municipality, reports :—

"The high infant mortality was noticed in the months of January, February and March and was chiefly due to Broncho-pneumonia as a complication of measles and most prevalent in the ill and poorly fed infants of depressed classes who were living in congested small huts unprotected from cold. To check this high infant mortality immediate measures were taken with the help of the local Influenza Relief Committee, woollen and cotton underwears were distributed free of charge to the poor and needy. To permanently reduce this heavy infantile mortality a Lady Health Visitor was also appointed. Also a Child Welfare Centre has been started in the Trans Fuleli quarter. This centre is in charge of the Lady Health Visitor and local branch of the Red Cross Society has decided to defray the expenses of this Child Welfare Centre."

The Assistant Director of Public Health, Southern Registration District reports :—

"Only two small municipalities of Ranebennur and Navalgund have each maintained qualified mid-wives. They attended 138 and 22 confinements in their respective municipal areas as against 88 and 32 during the previous year with a view to check the high infant mortality in their towns. In addition to this six taluka dispensaries of the Dharwar District have been provided with trained mid-wives and they are working under the instructions of the Dispensary Officers concerned in the taluka head-quarters only. They attended 127 cases of confinements and gave advice to the prospective mothers regarding cleanliness, exercise, food, etc."

In the Guzerat Registration District, corresponding with the increase in general mortality in 1926, high rates for infant mortality were recorded in all the districts. Infant life being very susceptible to prevailing environmental conditions suffered specially during the year. 28,391 deaths out of the total of 105,262 were among infants.

The abnormal rise in infant mortality in Surat District during the first half of the year was due mainly to the prevalence of epidemics of small-pox and measles. Malaria also contributed to the total. During the second half malaria increased and together with a heavy incidence of dysentery and diarrhœa was responsible for a majority of deaths among the infants. In Broach District, the increased mortality affected the infant and child population more or less throughout the year but specially so in the second half of the year when persons above sixty years of age also paid a heavy toll. In Kaira District it is found that deaths under 0-5 age period formed 52 per cent. of the total deaths under all ages. In the Panch Mahals District, the recorded birth-rate was high during the first half of the year thus providing a large number of infants susceptible to diseases like measles, small-pox, malaria and respiratory diseases to take their toll throughout the year. In the Ahmedabad District, infants suffered heavily practically throughout the year more so in the latter half of the year. In Ahmedabad City the infant mortality in August, represented 50 per cent. of the total mortality while a noticeable rise in mortality was recorded among 5-10 years and in old persons from September to the end of the year.

The following is a brief extract from the section that deals with infant mortality in the Annual Report of the Executive Health Officer, Bombay Municipality :—

"*Bombay City.*—The number of deaths among infants under one year of age was 8,200 being 988 more than in 1925, but 1,833 less than the annual average in the ten years 1916-1925.

The infant mortality rate expressed as the number of deaths in infants per 1,000 registered births was 389 as compared with a rate of 356 in 1925 and of 483, the annual average in the decennium (1916-1925).

Of the total deaths 5,376 occurred among infants born in Bombay and 2,824 in infants born elsewhere.

Were the rate to be calculated only on the deaths of infants born and registered in Bombay in proportion to the registered births it would be reduced from 389 to 255.

Causes of Death.—It will be seen that 6,347 or nearly 77 per cent. of the total deaths in infants were due to diseases of the Respiratory System, infantile debility and premature birth against 74 per cent. (5,307 deaths) in 1925. Diarrhœa and Enteritis caused 491 deaths, Malaria, Ague and Remittent Fevers 84, deaths and Convulsions 670 deaths. The deaths from small-pox and measles numbered 84 and 38, respectively.

Quinquennial Averages.—Compared with the averages of the preceding five years the total number of deaths shows a decrease of 997, the principal decreases in the mortality being 138 under diseases of the Respiratory System, 15 under Small-pox, 2 under Measles, 200 under Diarrhœa and Enteritis, 82 under infantile debility and premature birth and 11 under Dysentery. On the other hand increases were registered under Malarial Fever (10), and Ague and Remittent Fever and fever not defined (2).

Of the total deaths among infants, 1,790 or 22 per cent. took place in the first week of life and 1,146 or 14 per cent. in the age-period 1 to 4 weeks.

The mortality among infants who had not completed the first month of life was thus 2,936 or 36 per cent. of the total infant deaths. The number of deaths in the age-groups 1 to 6 months and 6 to 12 months was 2,258 and 3,006 being respectively 28 and 37 per cent. of the total infant mortality.

The salient features are the magnitude of the role played by debility and prematurity in the causation of death in the first 4 weeks of life and the large proportion of deaths from respiratory diseases during the remaining 11 months of infancy.

Infant mortality by Races.—Infant mortality among the principal castes are Hindus all other castes 412, Hindus low caste 434, Mussalmans 393, Parsees 143, Indian Christians 386, Jews 196, Anglo-Indians 147 and Europeans 105.

The high rates recorded in all communities suggest the presence in Bombay of some adverse factor in addition to the poverty and ignorance which are chiefly responsible for high rates in western countries. The added factor affecting all classes is probably Malaria ; another factor which can hardly fail to enhance the infant mortality among the more ignorant portions of the population is the practice of soothing babies by the administration of opium.

Captain Challam, I.M.S., Medical Officer in charge Anti-malarial Measures on the Back Bay Reclamation under the Development Directorate has kindly permitted the quotation of figures from his investigations which show that in 36 children under 2 years of age, living in railway quarters, 1 in every 3 was suffering from an enlarged spleen and 1 in every 6 was proved by Microscopical examination to be carrying the parasites of Malaria in its blood. Such figures even though they relate to a very small sample of the child population go far to confirm the suspicion that Malaria is a potent factor in the high infantile mortality of the City.

Syphilis as recently emphasised by the delegates of the British Social Hygiene Council contributes to the death-roll but whether to a greater extent than in other cities it is not possible to say when an overwhelming majority of the total deaths under 1 year are not certified by medical practitioners.

In Chowpati and Walkeshwar where the proportion of better class residents is high, the infantile death-rate, expressed as the number of deaths under 1 year per 1,000 births, is comparatively low. But even so the lowest death-rate recorded in these sections was 186 for Walkeshwar, whilst the rate for Chowpati was 283.

Rates exceeding 400 were recorded for Mandvi, Dongri, Market, Bhuleshwar, Mazagaon, Kamathipura, Byculla, Sion, Sewri, Kumbharwada, and Second Nagpada, the rate for the city as a whole being 389 deaths per 1,000 births of the total population.

The percentage of population occupying tenements of one room and under to the total number of occupants in all classes of tenements in the City by the Census of 1921 was 66. Of the 21,068 births registered in the year, 11,831 or 56 per cent. occurred in families living alone in a single room or sharing it with others, and the number of deaths in infants in this class of population was 6,827 or 83 per cent. of the total infant mortality.

The rate of deaths among infants in single room tenements per 1,000 births in such tenements during the year was 577 against 503 in 1925, and that the proportion of deaths to births varies inversely as the number of rooms occupied by the parents. For 2 rooms residences the figure is 254 ; three-rooms 215 and four or more rooms 163 and for Hospitals 107.

Prevention of Infantile Mortality.—The work which is being done in Bombay for the reduction of infant mortality may be described under the following heads :—

(*i*) Visits by the Municipal District Nurses for the purpose of getting into touch with prospective mothers and for discovering cases of sickness especially among women and children and unvaccinated children ; for inquiry into the condition of new-born infants ; and for giving instruction by homely talks as to the care and rearing of children.

(*ii*) Attendance on confinements.

(*iii*) Provision of necessaries and comforts during the lying-in period.

(*iv*) Maternity Homes.

(*v*) Infant Milk Depôts.

(*vi*) Infant Welfare Centres.

Summary of work.—During the year the 10 Municipal Nurses paid 43,906 visits to houses, chawls and huts (against 45,452 in 1925) inquired into 3,138 cases of ordinary sickness, and reported 231 cases of infectious diseases and 498 deaths in the female population of the City. They also attended on 1,389 confinements (against 1,455 in 1925) and verified the reports of the Birth Karkuns on 5,142 births. Of the women confined, 1,409 were primiparæ.

Of the total number of 22,744 births (including 1,676 still-births) registered in the City during the year, 9,699 or 43 per cent. were verified by the Municipal Nurses against 45 per cent. in 1925 and 53 per cent. in 1924.

Among the cases wherein enquiries were made, the proportion of births wholly unattended was 6 per cent. and that of confinements attended by unskilled women 37 as against 6 and 44, respectively in 1925.

The percentage of confinements attended by qualified midwives (other than Municipal) was 11 against 9 in 1925 and that of confinements attended by municipal midwives was 14 as against 15 in the preceding year ; the percentage of children born in Hospitals (31) showed an increase of 4·2.

The percentage of children born in healthy condition was 66 as against 71 in the previous year and that of children fed on breast was 68 as against 72 in 1925.

The proportion of children dying within 30 days of birth was 12 against 14 per cent. in 1925.

The percentage of mothers who left home for work leaving their children to the care of others shows an increase of 4·6.

Relief to poor women during confinement in the shape of necessaries and comforts such as milk, bread, bed, blankets, charpoys and linen was continued during the year and dispensed in 297 cases against 426 in 1925 and 448 in 1924.

The total number of women admitted in all the three Municipal Maternity Homes during the year was 1,798 against 1,676 in 1925. The number of cases confined in the three Homes was 1,633 against 1,535 in 1925. Of the women confined, 451 were primiparæ.

Infant Milk Depôts.—Two Infant Milk Depôts have been established, one at the Bellasis Road and the other at the Parel Road Maternity Home for distributing daily pure milk free or at a nominal price, for the benefit of children born in the Homes or under the supervision of the Municipal Nurses, 21,901 seers were distributed at these depôts during the year.

Voluntary Welfare Centres.—The Maternity and Child Welfare Scheme of the Infant Welfare Society has made much progress. At the end of the year the centres established numbered nine. The Society provides through them (1) advice and instruction to mothers as to infant management, (2) medical aid to infants, and (3) a staff of trained nurses for visiting the homes of infants. Each centre is in charge of a Supervisor who is a trained nurse and a midwife. She supervises the milk distribution and assists the Lady Doctor in charge in attending on babies and advising mothers on infant management. There is also a Health Visitor, who is a trained nurse midwife attached to each centre. She visits the babies in the district and persuades their mothers to take advantage of the Infant Welfare Scheme.

During the year, 36,667 seers of milk were given free, 25,801 seers were sold at 1 anna a seer and 46, 980 seers at 2 annas a seer. The number of new admissions at the nine centres was 4,258 and that of attendances for milk, medicine, treatment and advice 297,176.

The number of confinements attended by the Midwives of the Society was 1,020.

A creche is attached to the Tardeo Centre and now contains 38 children."

25. *Deaths by Castes or Classes.*—Deaths by classes and by sex are recorded in Annual Form No. V, Appendix III.

26. *Deaths according to Causes.*—The following table shows the number of deaths in 1926 and the ratio per 1,000 of population arranged according to causes and contrasted with the figures for 1925 and with the mean for the preceding five years :—

Causes	1926		1925		Mean for 5 years	
	Number	Ratio	Number	Ratio	Number	Ratio
Cholera	73	·00	57	0·00	4,761	·25
Small-pox	3,922	·20	5,644	0·29	4,510	·23
Plague	9,866	·51	12,601	0·66	13,721	·72
Fevers	222,466	11·61	183,764	9·59	203,700	10·63
Dysentery and Diarrhœa ..	34,158	1·78	20,643	1·08	23,945	1·25
Respiratory Diseases ..	103,038	5·38	83,047	4·33	86,910	4·53
Injuries	7,672	·40	7,754	0·40	7,668	·40
Other Causes	166,069	8·67	140,053	7·31	140,847	7·35
All Causes ..	547,264	28·55	453,563	23·66	486,062	25·36

There is a marked increase in mortality under all disease headings except small-pox, plague and injuries as compared with last year.

Contrast graphs of the monthly incidence of deaths under the chief causes for the year under report compare with 1925 and the mean of 1911-20 are shown in Chart III. Also graphs of annual incidence of deaths under the chief epidemic diseases—Cholera, Small-pox and Plague are shown in Chart IV.

Comments of the Causes of deaths are made in Section VI.

27. *Cantonments in Native States.*—The total number of births in Cantonments situated in Native States during the year 1926 was, 1,838 against 1,829 in 1925 giving a birth rate of 16·50 per 1,000 of the population against 16·42 for the previous year. There were 2,382 deaths equal to a ratio of 21·38 against 2,173 and a ratio of 19·51. The statistics are tabulated below :

Statement showing the names of Cantonments with population and Deaths from diseases for the year 1926

Cantonments	Population according to census of 1921	Area in square miles	Average population per square mile	Number of births	Ratio of births per 1,000 of population	Number of deaths						
						Cholera	Small-pox	Plague	Fevers	Dysentery and Diarrhœa	Respiratory Diseases	Injuries
Aden. Municipal Limits ..	44,000	70	629	737	16·75	..	3	..	350	338	136	18
Aden. Purely Civil Population of Cantonment ..	650	7·44	87·37	11	16·92	..	..	..	11	1	..	1
Baroda ..	2,934	1·09	2,934	17	5·79	..	1	..	20	3	2	..
Deesa ..	5,449	3	1,816	96	17·62	..	1	..	49	13	..	1
Mhow ..	31,734	6·5	4,882	299	9·42	..	..	..	129	..	57	..
Nasirabad ..	15,959	8	1994·7	474	29·70	..	..	..	209	30	39	7
Neemuch ..	10,490	4·52	2,539	196	18·68	..	4	..	144	10	..	1
Rajkot ..	175	·50	350	8	45·71	..	..	..	..	..	..	..
Total ..	111,391	101·05	1,003·3	1,838	16·50	..	9	..	912	395	234	28

Cantonments	Deaths from		Ratio of deaths per 1,000 of population								
	Other Causes	All Causes	Cholera	Small-pox	Plague	Fever	Dysentery and Diarrhœa.	Disease Respiratory	Injuries	Other Causes	All Causes
Aden. Municipal Limits ..	411	1,256	..	·07	..	7·95	7·68	3·09	·41	9·34	28·54
Aden. Purely Civil Population of Cantonment ..	9	22	..	..	..	16·92	1·54	..	1·54	13·84	33·84
Baroda ..	..	26	..	·34	..	6·82	1·02	·68	..	..	8·86
Deesa ..	18	82	..	·18	..	9·00	2·39	..	·18	3·30	15·05
Mhow ..	165	351	..	..	..	4·06	..	1·80	..	5·20	11·06
Nasirabad ..	119	404	..	..	..	13·10	1·88	2·44	·44	7·46	25·31
Neemuch ..	82	241	..	·38	..	13·72	·95	..	·09	7·82	22·97
Rajkot ..	..	..	..	..	..	..	..	..	..	..	..
Total ..	804	2,382	..	·08	..	8·19	3·55	2·10	·25	7·22	21·38

28. *Rainfall.*—The monsoon was late in onset but there was good rainfall in a very large part of the Presidency in the first half of July and the situation improved considerably. In August the north of the Presidency suffered from excessive rainfall and the south-east from deficiency, but the conditions were generally favourable elsewhere.

Guzerat.—In the absence of any really good rain, in most parts of Guzerat, the position was definitely precarious in June especially in view of the fodder famine experienced in many places. In July excepting a few places in the south of Surat where the rains somewhat exceeded the requirements and where in consequence a spell of fine weather was desired, the rains were splendid being both abundant and well distributed. The dominant features of the rainfall in August were excess in most parts of Guzerat. In September there was a break in the rains from about the end of September and this proved very beneficial to standing crops. In October, the rainfall was either light or absent.

Deccan.—In June the rainfall was only light in the North Deccan but in July it was especially good in the western portion of the Deccan but not so good in Khandesh and in the central belt of the Deccan. In the East Deccan the condition was not very satisfactory for want of rains. The rainfall of August was excessive in many places in Khandesh but scanty in the East Deccan. In September and October, the rainfall was excellent in the West Deccan and in most places of the North Deccan but fell short in places of East Deccan.

Konkan.—Good showers of rain were received during the months of June and July in the South Konkan and in many parts of the North Konkan. The position at the end of June was definitely satisfactory in Ratnagiri and Kanara districts. In September and October, excellent rain was received throughout the Konkan.

Karnatak.—The rainfall was fairly heavy and though good in many places in June, it was generally patchy and consequently the sowings had to be confined to the more favourable situation. In July the rains were good but they were deficient in August and the crops showed signs of withering. In early September some showers improved the prospects considerably but in October the rainfall proved short of requirements generally.

29. The prices of food-grains in Gujerat and Konkan districts were generally the same as those of the last year except in Kaira and Panch Mahals districts where they rose by 25 per cent. and fell by 6 per cent., respectively. In Sind the prices were much higher (except Karachi and Sukkur) while in the Karnatak they were lower in Bijapur and Dharwar districts and there was no change practically in Belgaum and Kanara districts.

The late rains have a greater influence on the general health of the Presidency and on the incidence of cholera during the year following than rain in the beginning of the monsoons since it is mainly through the late rains that wells get filled and the water-supply of rural areas during the ensuing hot weather is assured. It was failure of the late rains in

the Karnatak last year which was largely responsible for the heavy toll claimed by cholera in this part of the Presidency during the current year. If this influence of the late rains is borne in mind by officers of the Public Health Department and their advice to improve village water-supplies is acted upon in time by Local Authorities, it would go a long way in reducing the incidence of cholera during the year following the one in which the late rains have partially or completely failed.

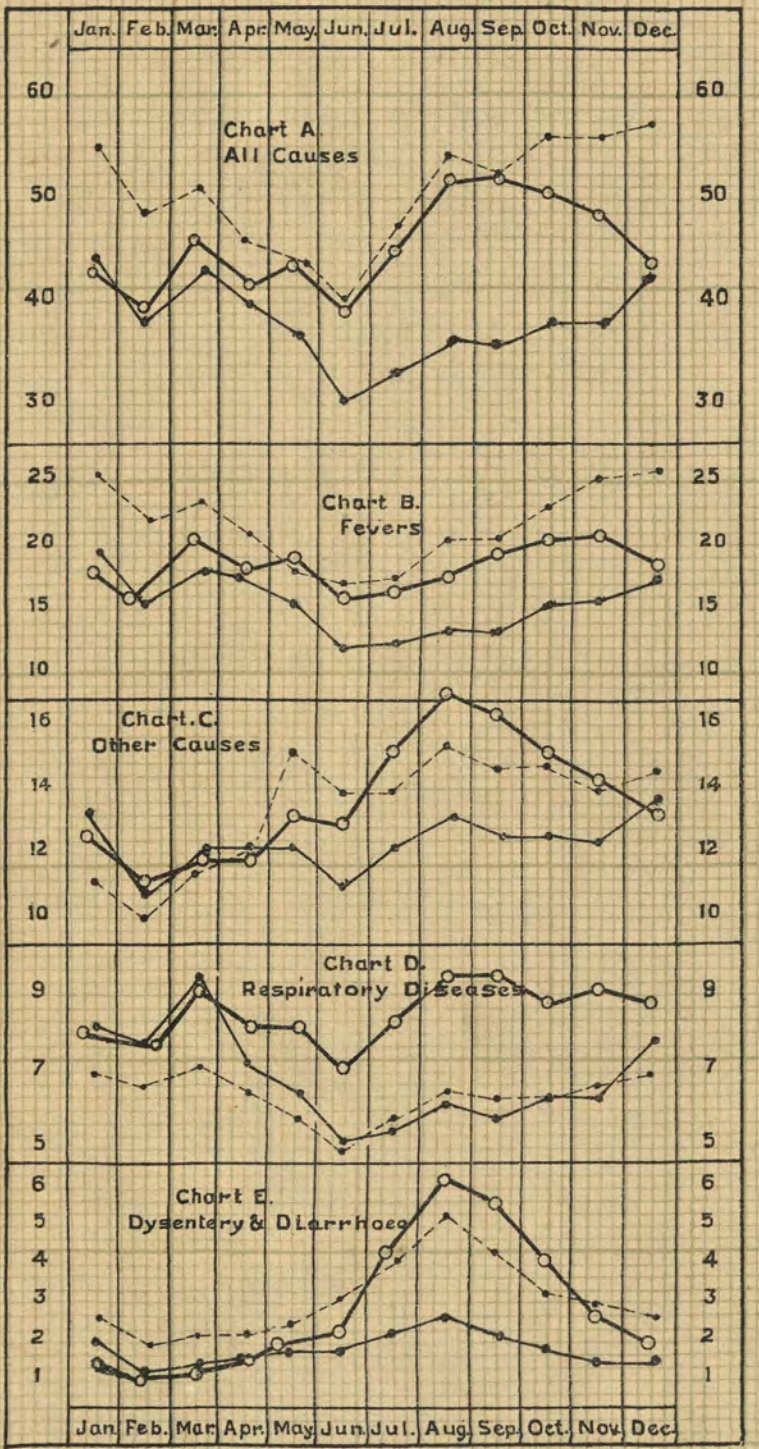
The amount of rainfall towards the end of the monsoons and the adequacy of the water-supply available are two among other factors which should always be considered by the Local Authorities and their public health advisers when they are required to decide the question of permitting or prohibiting a festival of any magnitude.

Chart III

MONTHLY INCIDENCE OF DEATHS FROM CHIEF CAUSES.

1926 o—o 1925 •—• Previous average* •– –•

Scale figures represent deaths in thousands.



* 1918 (Influenza year) Omitted in the average of charts A.B.& D.

SECTION VI

History of Chief Diseases

General Remarks

30. Following on 1925, the record of low death-rate, the year under report shows in comparison a high mortality. It is true that 1925 was an exceptionally healthy year and so does not lend itself for a fair comparison with 1926; notwithstanding this fact it cannot be gainsaid that 1926 has recorded a high death-rate even as compared to 1924 and the previous five years' mean. The health history of the Presidency from 1918, the year of the influenza pandemic judged by the total mortality figures, is one of steady progress up to 1922, the year of a record low death-rate (23·61) and thereafter of gradual return to the low standard that normally prevailed. Thus the death-rate figure for 1923—25·89, for 1924—27·63, for 1925—23·66 and for the year under report—28·55 indicate the return to the 1911-15 mean of 27·56. If we look closely into the records of the year, we find that the set-back is mainly due to four recurrent death factors, *viz.*, Fevers, Dysentery and Diarrhœa, Respiratory Diseases and Other Causes. The further increase in births for the year suggests in itself improvement in conditions but it brought along with it more than the usual increase in infant deaths that accompanies. Thirty-three per cent. of the increase in total mortality over last year's total is in deaths of infants. The year proved unhealthy also for the other extreme of life—age sixty and over.

The increase appears in nearly all of the separate major headings of causes of death. Thus comparing the figures with those of the preceding year " Intestinal Diseases " show an increase of 65 per cent., " Respiratory Diseases " 24 per cent., " Fevers " 21 per cent., and " Other Causes 18 per cent., while the chief epidemic diseases—Cholera, Small-pox, Plague, and Influenza combined show a reduction of 30 per cent. For Influenza, alone of epidemic diseases, a lower figure of deaths—362 was recorded, but there is reason to believe that it was more prevalent than in 1925 in a milder form generally but with virulence reminiscent of the pandemic of 1918 in two or three fortunately very localised areas. That Influenza persists, is shown by the curves (Chart IV) of deaths from respiratory diseases which is the only general disease heading that continues to compare unfavourably with its pre-pandemic average. Similarly, if fever mortality during the year under report be compared with the figures for 1925 and with the mean for previous five years it will prove the same thing.

The following paragraphs deal with the deaths under the different headings and further comparison is shown in the table in paragraph 26 and in graphic form in the charts inserted in this Report.

Fevers

31. 222,466 deaths (113,949 males and 108,517 females) the highest figure recorded since 1922—were registered as due to fevers against

183,764 in 1925 and a quinquennial mean of 203,700. The death-rate was 11·61 against 9·59 in 1925 and a quinquennial mean of 10·63.

The annual mortality recorded under this heading in previous years is given in the following table :—

Year	Fever deaths	Rate per mille	Year	Fever deaths	Rate per mille
1901-10 mean	.. 258,497	14·00	1921	.. 226,100	11·80
1911-1915 mean	.. 247,926	12·66	1922	.. 197,888	10·33
1916	.. 262,401	13·40	1923	.. 196,231	10·24
1917	.. 298,919	15·26	1924	.. 214,563	11·20
1918*	..1,284,013	65·55	1925	.. 183,764	9·59
1919	.. 274,759	14·03	1926	.. 222,466	11·61
1920	.. 266,092	13·58			

The increase in mortality was shared by all the Registration Districts. Guzerat recorded the highest increase—44,086 deaths or a ratio of (14·91) being returned, Western 54,127 (13·59), Sind 47,169 (14·46), Central 42,642 (9·21), and Southern 31,291 (9·83) as compared with 27,811 (9·42), 45,851 (11·51), 41,033 (12·58), 37,979 (8·20) and 27,599 (8·67), respectively in 1925.

The distribution of fever deaths is shown in Annual Form No. IX. The highest death-rates were recorded in Thar and Parkar (19·54), Broach (19·24), Panch Mahals (17·66), Ahmedabad (16·99), East Khandesh (16·66), Sukkur (16·20), Nawabshah (15·70), Larkana (15·01), Nasik (14·76), West Khandesh (13·85), Upper Sind Frontier (13·01), Hyderabad (12·75), Kaira (12·37), Kolaba (12·00), Bijapur (11·52), Surat (11·38) and Satara (11·20).

The urban death-rate was 7·84 and the rural 12·52 as compared with 6·11 and 10·43, respectively in 1925. The highest urban death-rates for the Presidency proper were recorded in Dohad (27·63), Anand (25·94), Ankleshwar (23·99), Yeola (23·37), Dholka (23·33), Nadiad (22·87), Viramgaon (20·42), Borsad (20·06), Kapadvanj (20·00), Jambusar (19·68), Mehmedabad (17·32), Barsi, (16·62), Sholapur (15·70), Dakore (15·27), Chalisgaon (14·84), Lonavla (14·61), Godhra (14·57), Dhandhuka (14·28), and Umreth (13·98), and in Sind Garhiyasin (28·71), Ratedero (28·03), Matiari (24·36), Nawabshah (23·47), Kambar (20·10), Larkana (16·72), Rohri (15·55), Tatta (14·64), Kotri (14·10) and Mirpurkhas (13·18).

Details of sub-headings of deaths from fevers are as follows :

32. *Malaria.*—54,224 deaths against 48,505 in 1925. The figures are for Sind 35,433 (or 75 per cent. of the total fever deaths), Southern Registration District 6,652, Central 5,899, Western 4,594 and Guzerat 1,048 as compared with 31,403, 7,598, 5,280, 2,953 and 716, respectively, in 1925. 598 deaths were registered in Bombay City against 555 in 1925.

The death-rate from malaria for the Presidency as a whole was 2·83 against 2·53 in 1925. Excluding Sind, the rate was 1·18 against 1·07 in 1925. The urban and rural death-rates were 1·13 and 3·24 respectively as compared with 0·95 and 2·91 in 1925.

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* Influenza year.

As usual the rural death-rates are considerably higher than urban. The highest rural death-rates from malaria were recorded in Sind. Sukkur was the district of greatest severity showing a rural death-rate of 15·13, Thar and Parkar coming next with a rate of 14·50. The other district rural rates were Nawabshah 12·62; Hyderabad 11·34; Larkana 11·04; Upper Sind Frontier 10·81 and Karachi 9·18. Five rural districts, *viz.*, Karachi, Hyderabad, Nawabshah, Thar and Parkar and Upper Sind Frontier which usually suffer most from malaria showed an increase of deaths over the previous year and the remaining two districts Larkana and Sukkur showed decrease of deaths from malaria. It will be noticed that the decrease in Larkana and Sukkur is very small. In fact all the rural districts suffered heavily from malaria due to excessive flooding and heavy rainfall during the year under report. By urban circles, the highest death-rates were recorded in Matiari (19·19), Garhiyasin (17·57), Rohri (15·55), Larkana (14·69), Nawabshah (13·72), Ratodero(13·30), Tatta (12·16) and Mirpurkhas (12·14), and the lowest in Karachi (0·16) and Jacobabad (0·95). No deaths were reported in Sukkur town as was the case last year.

In the Presidency, Poona (4·10), Kanara (3·69), Dharwar (2·91), Ahmednagar (2·71), Nasik (2·44), Belgaum (1·98), districts returned the highest rural rates and the rates for Jambusar (19·19), Umreth (13·98), Lonavla (10·31), Surat (4·19), Junnar (2·98), Panwel (2·80), Bijapur (2·77) and Poona Suburban (2·65) were the highest for towns.

33. *Anti-malarial measures.*—For the treatment of sufferers, 29 Subordinate Medical Service Officers were appointed on special duty—5 for Kanara, 3 for Thana, 3 for West Khandesh, 2 each for Poona, Dharwar, Ratnagiri and Hyderabad and 1 each for Nasik, Kolaba, Surat, Ahmedabad, Karachi, Nawabshah, Thar and Parkar, Larkana, Sukkur and Upper Sind Frontier districts.

In Sind, during the period—October 1926 to February 1927—651 villages were visited by the 9 S. M. S. Officers, 16,795 malarial patients and 3,892 other patients in all 20,687 patients were treated by them. During the year under report, in all 129,769 malarial patients were treated at the various Civil Hospitals and Dispensaries in Sind—Karachi 26,340, Hyderabad 22,627, Thar and Parkar 14,602, Nawabshah 23,071, Larkana 20,510, Sukkur 13,925 and Upper Sind Frontier 8,694.

Distribution of quinine.—During the year under report Government sanctioned (1) Rs. 50,000 for free distribution of quinine, (2) Rs. 55,000 for sale of quinine at Post Offices, and (3) Rs. 20,200 for the cheap sale of quinine treatments.

Out of the first grant Rs. 31,865 were spent on supplying quinine to various offices in the Presidency through the Revenue and other officials, quinine worth Rs. 5,585 being distributed among school children in Sind through the Educational Department. It was also distributed by the Assistant Directors of Public Health, Inspectors of Sanitation and Vaccination, and selected vaccinators.

Out of the second grant, Rs. 21,625 were spent in purchasing quinine powder and making up packets, etc., for sale at Post Offices. The Superintendents, Yeravda and Hyderabad Central Prisons, credited Rs. 28,904 realised from the sale into the Government Treasury.

Out of the third grant, Rs. 8,098 were spent in purchasing parcels of quinine treatments from the Medical Store Depôt. The price recovered from the officers of the various Departments amounted to Rs. 3,444.

The following samples of comments on the utility of this quinine policy received from District Officers may be given :

The Collector of Panch Mahals reports.—

" Nowadays people like to use quinine in the season of malarial and other fevers. They like to use pills as they find it difficult to use powder. If quinine is supplied in pills as was done last year, its use will be larger. It can be said that quinine was very useful for preventing and removing malarial fevers."

The Collector of Kanara remarks :

" The system has been working satisfactorily. The public of this district are fully aware of the value of quinine and the demand is considerable. The scheme of free distribution is much appreciated by the public. "

The Collector of Bijapur reports :

" Whenever quinine was distributed, it proved of great use in preventing malaria. Public have now learnt to appreciate the efficacy of quinine. "

The Deputy Commissioner, Upper Sind Frontier, reports in similar terms.

The Collector of Kolaba reports :

" The public greatly appreciate the value of quinine as producing an effective check over malarial fever. "

The Collector of Nawabshah reports :

" The Administrative Officer, School Board, Nawabshah, states that from the statistics kept by the various masters in connection with the administration of quinine and observations recorded by them, it appears that most of the boys who had taken quinine regularly as a preventive from the very commencement of the malarial season did not at all suffer from the disease and the few that were attacked by it got over it easily. "

The Collector of Sukkur reports :

" The efficacy of quinine in the prevention and cure of malarial fever is fully recognised and the free distribution of the drug has considerably popularized its use. "

The Collector of Larkana reports in similar terms.

The Collector of Thana states " that at Shahapur it is recorded by the school masters that the attendance of boys does not go down in the season of malaria as the school is supplied with quinine for distribution. On the whole the general aversion towards quinine has disappeared and its demand is increasing as the villagers come to know of its prophylactic value. "

The Collector of Hyderabad reports :

" Quinine is very extensively used as a prophylactic and the large demand for the drug shows its efficacy. It is also used as a cure for malaria. "

There is thus a consensus of opinon that the drug is advancing in popularity among the people, pills or tablets naturally enough being preferred to powder.

Very few people ever take quinine for a sufficiently long period to eradicate the disease from their systems, and even if they did the danger of fresh infection as long as they live in malarious surroundings would continue.

I may quote the example of Dhanora (West Khandesh) to prove the good results which could be achieved through simple anti-malarial measures. In 1921, a malaria survey of the Mission Settlement of Dhanora, was undertaken and it was found that the spleen rate was 28·5 per cent. The measures recommended were to train the margins of the rivulet and to clear the brushwood jungle and regular use of quinine. These were faithfully carried out by the Swedish Missionaries. In a letter received from Dr. Hedberg (the Head of the Mission) a few weeks ago he states that these measures had succeeded in reducing the incidence of malaria by 50 per cent. in this Settlement.

34. *Enteric Fever.*—2,276 of the "Fever" deaths were registered as due to Enteric as against 2,305 in 1925. The accuracy of death figures allocated to this sub-head especially in rural areas is not to be relied on. The figures are for the Southern Registration District 1,265; Central 511; Sind 342; Guzerat 31 and Western 3; as compared with 1,100; 406; 637; 17 and 6 respectively in 1925. 124 deaths were recorded in Bombay City against 139 in the preceding year. Among town circles Dharwar and Bijapur returned high death-rates of 1·98 and 0·89, respectively.

35. *Measles.*—7,146 deaths were registered against 4,072 in 1925. The Guzerat Registration District recorded the highest number of deaths—2,234; Sind 1,415; Southern 1,280; Central 1,137 and Western 956 as compared with 608; 267; 730; 864 and 1,452, in 1925. In Bombay City 134 deaths were recorded against 151 in 1925. The highest death rates for urban areas were recorded in Garhiyasin (6·75), Dholka (5·11), Kapadvanj (4·80), Dohad (4·73), Hyderabad (3·27), Malegaon (2·99), Ahmedabad (2·86), Shikarpur (2·49), Surat (2·43), Matiari (2·37), Gokak (2·30), Kambar (2·23), Viramgaon (2·17), Mehmedabad (2·09), Larkana (1·86), Barsi (1·81), Nasik (1·78), Kotri (1·65) and Karachi (1·57).

Being a highly contagious disease, the urban contribution to the mortality from measles is higher than that in rural circles where the population is more sparsely distributed, and the facilities for the spread of contagion are fewer.

The Assistant Director of Public Health, Guzerat Registration District, remarks :—

"From the nature of the disease (Measles) and from the fact that parents consider it a mild affection, it being not a notifiable disease, it prevails throughout the year. The maximum mortality, however, is generally recorded in the hot weather months though November and December are not always free. Owing to its contagious nature specially during the incubation period (pre-eruption stage), when only symptoms of ordinary cold are manifest, it spreads very quickly in congested areas in large towns. Being in itself not very fatal, it, however, exacts a heavy toll from infants and child-life due to neglect in its proper treatment and consequent complications mainly of the respiratory system."

"Out of a total number of 2,224 deaths from Measles in the whole of Guzerat, Ahmedabad City reported 774 deaths and Surat 286."

"The majority of deaths under Measles were recorded in the first four or five months of the year, the disease having shown a tendency to attain a more virulent form towards the end of 1925."

36. *Relapsing Fever.*—No death was reported from this cause during the year under report.

Kala Azar.—Two deaths were reported from Bombay City.

Influenza

37. There was a slight rise in mortality from Influenza as compared with the previous year, the total deaths recorded during the year being 362 against 192 in the preceding year.

The following table shows the deaths as estimated from Influenza for the first two years since its appearance and as registered thereafter :—

Year	Number of deaths	Year	Number of deaths
1918	1,041,481	1923	991
1919	39,786	1924	578
1920	16,690	1925	192
1921	3,679	1926	362
1922	1,222		

In Nasik District, 90 deaths were recorded. Out of these, Peint Taluka contributed 86 deaths. The District was quite free during the preceding year. There were small outbreaks in East Khandesh and Thana districts.

In Southern Registration District, 78 deaths were recorded against 25 in 1925. Belgaum, Dharwar and Bijapur districts returned 24, 32 and 22 deaths, respectively.

In Guzerat Registration District, 66 deaths were recorded against 30 in 1925. Out of these, 50 deaths were reported among the coolies of the Shivrajpur and Bamankuwa Mines of Panch Mahals District. The first case was reported from Shivrajpur Mine on 20th January. The Assistant Director of Public Health, Guzerat, reports :

"The rise in the incidence of the disease was said to coincide with spells of cold weather. Due to the habits of the coolies of crowding together in their living rooms and refusing medical treatment, the number of cases and deaths went up steadily and segregation was found to be impossible."

In Sind Registration District, 20 deaths were recorded against 30 in 1925. Out of these, Karachi and Hyderabad towns reported 9 deaths each.

In connection with the epidemic of Bombay City, the Executive Health Officer, reports :—

"The type of the disease was mainly respiratory but some cases of abdominal type were also seen. Leaflets instructing the public what to do for the prevention of the disease were distributed throughout the city and they were advised to avail themselves of the medical relief afforded at the Municipal Dispensaries. Influenza vaccine was not used."

"One death among Europeans and 2 among Anglo-Indians were registered."

Respiratory Diseases

38. 103,038 is the total number of deaths recorded (55,143 males and 47,895 females) as due to Respiratory Diseases against 83,047 in 1925 and 86,910 the quinquennial mean. The figure during the year under report was the highest since 1918 (Influenza year) and before—previous averages—1901-1910 and 1911-1920. The increase over the years preceding the Influenza pandemic (1918) is attributed to improvement in registration of deaths as regards cause, and the increase after 1918 is partly due to actual number of deaths and partly to improved registration of deaths by causes.

The mortality list for previous years is as follows :—

Year	Deaths	Rate	Year	Deaths	Rate
1901-1910 mean ..	57,723	3·12	1921	93,336	4·87
1911-1915 mean ..	62,181	3·17	1922	82,682	4·31
1916 ..	79,882	4·08	1923	84,334	4·40
1917 ..	90,667	4·63	1924	91,103	4·75
1918 ..	119,680	6·11	1925	83,047	4·33
1919 ..	98,633	5·04	1926	103,038	5·38
1920 ..	96,486	4·93			

The death-rate was 5·38 against 4·33 in 1925 and a quinquennial mean of 4·53. The urban rate (9·50) greatly exceeds the rural (4·38) as compared with 8·51 and 3·31 in 1925.

Guzerat Registration District recorded the highest number of deaths—30,419; Central 22,039; Western 19,525; Southern 11,034; and Sind 6,633; as compared in that order with 23,187; 17,496; 13,306; 9,658; and 6,107 in 1925. Bombay City recorded 13,388 deaths as against 13,293 in 1925.

The highest rates were returned from the Collectorates of Surat (12·24), Kaira (11·86), Broach (11·72), Ahmedabad (9·78), Poona (6·71), Ahmednagar (6·18), Nasik (6·03), East Khandesh (5·09), Kolaba (5·06), Karachi (4·77), Ratnagiri (4·67), West Khandesh (4·55), Bombay Suburban (4·08), Belgaum (3·89), Panch Mahals (3·87), and Thana (3·72). Bombay City recorded a death-rate of 11·65 from this cause as compared with 11·57 in the year preceding.

The death-rate under this heading is with the exception of "Fevers" and "Other Causes" the highest in the Presidency.

Urban areas record much higher rates than rural, the result of congestion and consequent facility for spread of these diseases and probably also to more correct allocation of deaths under the head. The highest rates for urban areas were recorded in Ahmedabad (19·50), Umreth (18·54), Jambusar (16·14), Hyderabad (15·49), Poona City (15·16), Viramgaon (14·02), Surat (13·74), Nadiad (13·19), Dakore (13·14), Dhandhuka (12·17), Nasik (12·13), Broach (11·66), Pandharpur (11·46), Bulsar (11·08), and Karachi (10·30).

The highest rural death-rates from this cause were recorded in the Districts of Kaira (12·18), Surat (12·06), Broach (11·91), Ahmednagar (6·20), Nasik (5·78), Poona (5·25), East Khandesh (5·14), Kolaba (5·12), Ahmedabad (5·03), and Ratnagiri (4·70).

39. *Phthisis.*—21,892 deaths from this cause were registered equivalent to a death-rate of 1·14 for the Presidency as a whole. The corresponding figures for 1925 were 17,832 and 0·93 respectively. By Registration Districts, the total figures were Central 5,950; Western 5,460; Guzerat 5,168; Southern 2,655, and Sind 1,120, as compared with 5,425; 3,134; 4,503; 2,518 and 1,061, in the previous year. In Bombay City, phthisis deaths were 1,539 equal to a death-rate of 1·34 compared with 1,191 or a death-rate of 1·04 in the previous year.

The urban death-rate was 1·83 and the rural 0·97 against 1·58 and 0·77 in the previous year. The highest death-rates for urban areas were recorded in Dharangaon (6·21), Rander (5·97), Bhiwandi (4·43), Ahmedabad (4·18), Poona City (3·71), Nasik (3·16), Pandharpur (3·13), Ilkal (3·12), Hyderabad (3·08), Chiplun (3·00), Surat (2·99), and Ratnagiri (2·73).

The highest death-rates for rural areas were recorded in the Districts of Kolaba (3·04), Ratnagiri (2·52), Kaira (2·10), and Thana (1·46).

Phthisis is a disease of town life congestion playing an important part in disseminating the disease. The disease affects persons in the prime of life, the mortality being highest between 20 and 40 years.

Guzerat and the other Districts surrounding Bombay—Kolaba, Ratnagiri and Poona—return the highest rates. In Guzerat, the congestion in some big cities and certain customs prevailing in some communities like the purdah among the Bohra women, early marriage followed by repeated pregnancies among the better class Hindus, and the practice of having confinements conducted in dark and ill-ventilated rooms are largely responsible for the high death-rate from phthisis in these places.

Prevention of this disease, like the solution of many another Public Health Problem will depend on the joint effort of the Hygienist and the Sociologist; and relief of congestion; provision of Sanatoria, and even education in the methods of prevention of phthisis will achieve but little in the shape of net results as long as social customs favourable to the propagation of this disease are allowed to continue.

It is under contemplation to request the Indian Research Fund Association to depute an expert to enquire into the prevalence of phthisis in Ahmedabad City (and perhaps, Surat also) provided an assurance that there is a reasonable prospect of the recommendations being adopted, is forthcoming.

As for the high incidence of this disease in rural areas of districts near Bombay, it is probably accounted for by workmen contracting phthisis in

Bombay, returning to their homes, and spreading it among their neighbours.

Of the 250 deaths recorded in Kanara District, 175 occurred in the below-ghat talukas and the remaining 75 in the above-ghat. The below-ghat talukas are mostly sea-ports and are considered to be generally healthier than the above-ghat talukas which are dense forest areas. The higher mortality from phthisis in below-ghat talukas may be attributed to the fact that a large amount of labour for mills in Bombay is recruited from these talukas.

These remarks apply also to Ratnagiri, Kolaba and Thana Districts which supply labour to Bombay City.

The Assistant Director of Public Health, Sind Registration District, reports :—

"The year 1926 shows the highest number of deaths from Respiratory Diseases since 1916. This is either due to greater virulences of these diseases or more chances of transmission of these diseases exist at the present day owing to present economic and social conditions. It has been proved that "the common Hukah and the common towel" as well as overcrowding in dwelling houses are some of the potent customs which favour transmission of these diseases. Propaganda and education of the public is urgently necessary if any appreciable reduction is to be made in the heavy toll of life exacted by these preventable diseases."

"In Hyderabad town 224 deaths from consumption were recorded during the year under report as against 240 in 1925 and 231 in 1924. The year is marked by the opening (by the Hyderabad Municipality) of a Tuberculosis Dispensary and appointing a Tuberculosis Officer from 1st May 1926 to attend to all tuberculosis patients attending the dispensary and also other poor tubercular patients in their houses free of charge. During the year several magic lantern demonstrations on consumption were given to the ladies in different parts of the city."

I visited this institution last April and was very favourably impressed by the enthusiasm displayed by the Medical Officer and good work which was being done.

Tuberculosis Institutions :—"The Anti-Tuberculosis Dispensary in Karachi City is doing good work. During the year under report 20,534 patients were treated against 23,060 in 1925. Of 20,534 patients, 13,420 were definitely tuberculosis while 7,114 were kept under observation or suspected of tuberculosis. 1,049 new patients were admitted during the year."

40. *Pneumonia.*—20,654 deaths were registered equivalent to a death rate of 1·08 per mille for the Presidency as a whole. The corresponding figures for 1925 were 18,950 and 0·99. By Registration Districts—4,280 deaths were recorded in Sind; 4,098 in Guzerat; 1,854 Western; 1,655 Central; and 228 Southern, as compared with 3,996; 3,655; 1,221; 1,479 and 149, respectively, in 1925. Bombay City registered 8,539 pneumonia deaths against 8,450 in 1925.

The urban death-rate was 3·79 and the rural 0·42 against 3·55 and 0·37 in 1925. Amongst the highest urban death-rates were those of Hyderabad (9·95), Nadiad (9·81), Bulsar (9·35), Poona City (9·12), Surat (5·86), Nasik (5·48), Umarkot (5·24), Karachi (4·52), Mirpurkhas (3·30), and Kotri (3·08), while the highest rates for rural areas were recorded in the districts of Surat (2·60), Thar and Parkar (2·45), Broach (1·69), and Hyderabad (1·39).

The Assistant Director of Public Health, Sind, reports :—

" In Karachi City 899 deaths were recorded from pneumonia against 678 in 1925. As it was observed by the Assistant Director of Public Health from the daily mortality returns that pneumonia was raging in Karachi City, a pamphlet containing information regarding the spread and prevention of pneumonia was written by him and forwarded to the Municipality for publication and free distribution of copies among the public."

" In Hyderabad town, 723 deaths were recorded from pneumonia including broncho-pneumonia as against 464 in the previous year. The cause of high mortality as reported by the Health Officer, Hyderabad Municipality, was chiefly due to broncho-pneumonia as complication of measles and appeared most prevalent in the ill and poorly fed infants of low caste people and other damp mud walled hut dwellers who were living in congested small huts unprotected from cold winds. Necessary precautions were taken by the Municipality with the help of the local Influenza Relief Committee, local branch of Red Cross Society."

Cholera

41. In 1926 the Presidency was practically free from cholera, as during the year previous, only 73 deaths having occurred—by far the lowest figure recorded during the last fifty years.

Of these 73 deaths, 43 occurred in the Western, 16 in the Central, 5 in the Southern, 3 in the Guzerat, 1 in the Sind Registration Districts and 5 in Bombay City.

There was thus nothing in the nature of an epidemic although cases occurred over a fairly wide area, fifteen Collectorates out of twenty-seven in the Presidency as a whole being affected.

The following table gives the deaths recorded since 1900 :—

Year	Deaths	Year	Deaths
1900	163,200	1914	17,779
1901	13,600	1915	377
1902	3,229	1916	19,841
1903	1,825	1917	17,003
1904	13,156	1918	8,834
1905	5,396	1919	51,551
1906	46,119	1920	2,047
1907	7,656	1921	3,521
1908	1,759	1922	2,768
1909	28,714	1923	9,221
1910	3,694	1924	8,236
1911	5,817	1925	57
1912	64,505	1926	73
1913	5,134		

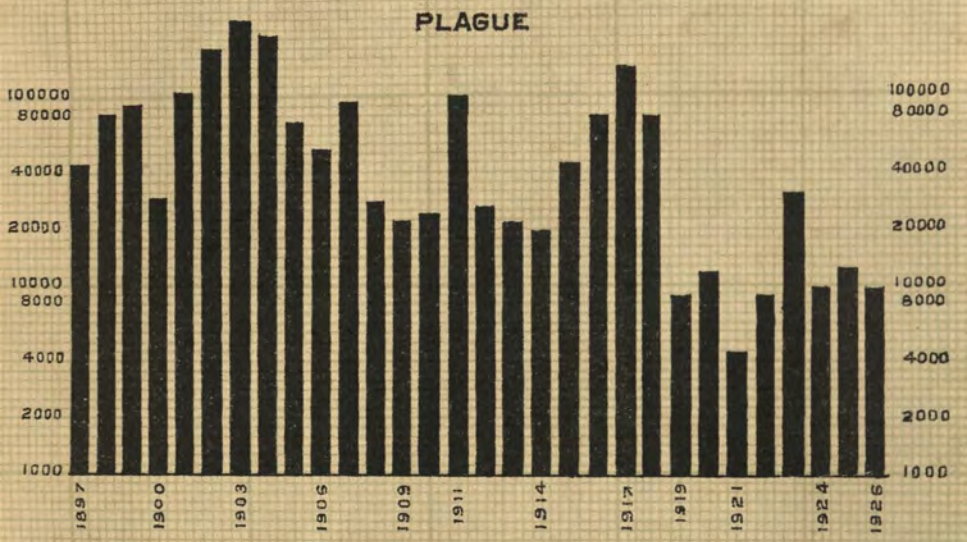
42. *Expenditure on Cholera outbreaks.*—During the year under report a grant of Rs. 15,000 was sanctioned by Government for measures against outbreaks of cholera, *e.g.*, the supply of potassium permanganate for disinfection of village water-supplies, and of cholera treatments. Out of this sum, approximately Rs. 750 were spent.

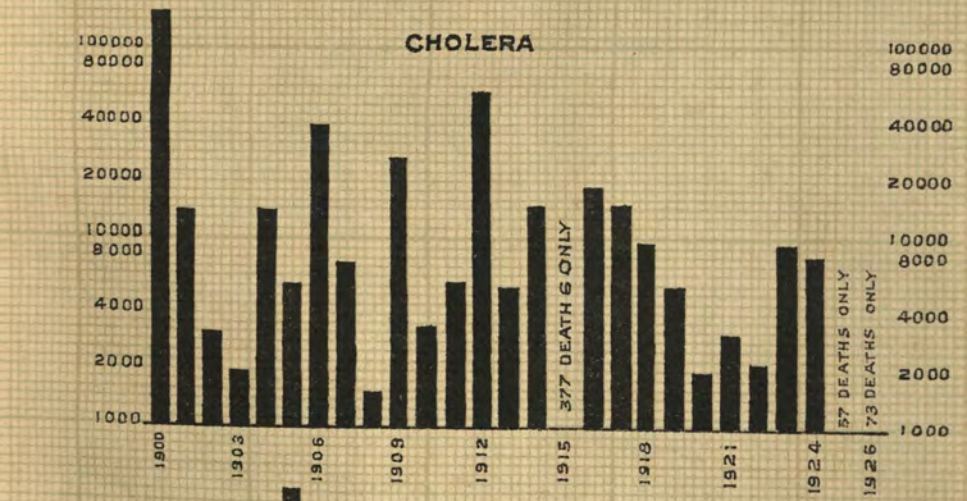
43. While concluding the history of cholera epidemic during the year 1926, it is to be noted that the years 1925 and 1926 enjoyed complete freedom from the ravages of this disease but the year 1927

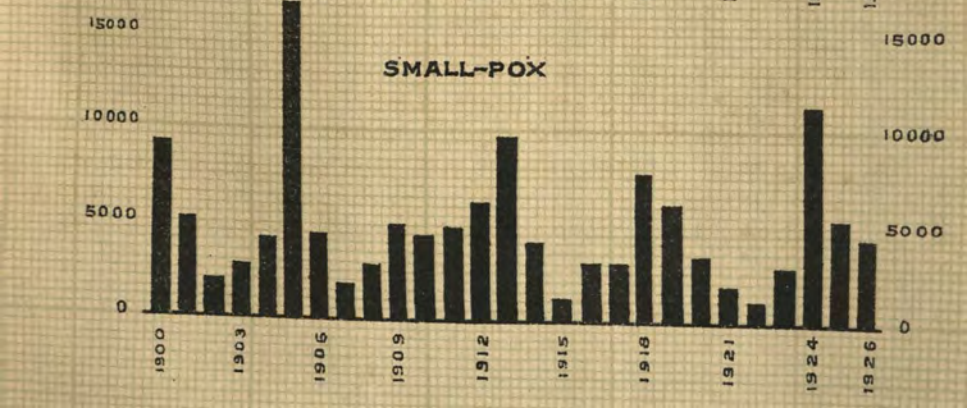
CHART IV

ANNUAL INCIDENCE OF DEATHS FROM EPIDEMIC DISEASES

Scale figures represent actual deaths. For Plague & Cholera, figures are at their log: intervals and only those above 1000 are shown.







will be a bad cholera year as anticipated as a result of the discussion at the Fourth Conference of the All-India Medical Research Workers held in Calcutta in December 1926.

Dysentery and Diarrhœa

44. This heading shows a considerable increase on the previous year's figures—34,158 deaths (17,776 males and 16,382 females) against 20,643 in 1925 and also on the mean for the last five years (23,945). The death-rate was 1·78 against 1·08 in 1925 and 1·25 the quinquennial mean.

The number of deaths registered under dysentery and diarrhœa in previous years is as follows :—

Year	Deaths	Year	Deaths
1901-1910 mean ..	52,919	1923	22,238
1911-1915 mean ..	39,455	1924	28,926
1916-1920 mean ..	34,156	1925	20,643
1921	26,799	1926	34,158
1922	21,118		

The wastage of life from these diseases is avoidable and since their incidence depends on defective conservancy and polluted water, when money is made available for improving conservancy and protecting water-supplies a lowering of the incidence of these diseases is bound to follow.

Impurities in the water-supply is associated with the death-rates under this heading and a perusal of past vital statistical records show the benefit to be derived firstly from the installation of a piped supply and later from attention to all the details of working it.

Central Registration District recorded the highest number of deaths —11,003, Western 7,819, Southern 7,635, Guzerat 4,568, and Sind 844, as compared with 6,856, 4,012, 4,818, 2,043 and 447 in 1925. 2,289 deaths were recorded in Bombay City against 2,467 in the previous year.

The urban death-rate was 2·01 and the rural 1·73 against 1·46 and 0·98 respectively in 1925. The highest death-rates for urban areas were recorded in Honawar (12·22), Kumta (7·63), Borsad (6·94), Ashta (5·99), Bhatkal (5·33), Surat (4·94), Gokak (4·81), Nasirabad (4·51), Pandharpur (4·48), Gokarn (4·45), Bhiwandi (4·27), Malegaon (4·22), Mehmedabad (4·17), Islampur (4·17), Dharangaon (3·91), Erandol (3·76), Poona City (3·55), Jalgaon (3·25), Kurla (3·23), and Poona Suburban (3·22). The highest death-rates for rural areas were recorded in the districts of Kanara (3·84), Belgaum (3·82), Ahmednagar (3·63), East Khandesh (3·21), and Satara (3·17).

45. *Dysentery.*—Under the first sub-heading 6,663 deaths were registered against 3,612, the death-rate being 0·35 against 0·19 in 1925.

The urban death-rate was 0·56 and the rural 0·30 as compared with 0·35 and 0·15 in the previous year. Eight towns returned death-rates above two per thousand of population; Kanara towns returned the highest death-rates from this cause, *viz.*, Honawar (10·38), Kumta (6·44), Bhatkal (4·35), Gokarn (4·33), and elsewhere—Borsad (2·81), Erandol (2·80), Kurla (2·38), and Nasirabad (2·05).

46. Under Diarrhœa, 27,495 deaths were recorded against 17,031 in 1925. The death-rate was 1·43 against 0·89 in the previous year. The urban death-rate was 1·46 and the rural 1·43 as compared with 1·12 and 0·83 respectively in 1925.. Twelve towns returned death-rates above three per 1,000 of population, *viz.*, Ashta (5·99), Pandharpur (4·28), Malegaon (4·18), Islampur (4·17), Borsad (4·13), Gokak (4·00), Bassein (3·78), Lonavla (3·61), Dharangaon (3·51), Surat (3·50), Poona City (3·25) and Poona Suburban (3·22). The highest death-rates for rural areas were recorded in the districts of Belgaum (3·54), Ahmednagar (3·29), Satara (3·16), East Khandesh (2·51), Sholapur (2·45), Poona (2·16), and Nasik (2·15).

The Assistant Director of Public Health, Southern Registration District, reports :—

"During the year there has been a marked rise in mortality from dysentery. This is to be attributed almost entirely to its prevalence in epidemic form in Kanara District. The presence of the epidemic was not reported but its presence was suspected by the Assistant Director of Public Health, through noting the mortality returns received from the District. This suspicion was amply confirmed after enquiries were made. The Assistant Director came to the conclusion that Bacillary dysentery was prevailing and the Collector, the Civil Surgeon, various Mamlatdars and Municipalities were advised about the action to be taken in the matter. Wide publicity was given to the preventive measures to be adopted by the villagers themselves. A very large number of wells were disinfected by Inspectors and vaccinators. The Medical Officers of Kumtha and other talukas were asked to adopt curative and preventive measures. Arrangement was made to place at the disposal of the Civil Surgeon, Kanara, 100 doses of Billi-vaccine but no experiment could be carried on as the epidemic had subsided by that time. The prompt action taken by the Department on discovering the prevalence of the epidemic, helped considerably in checking its prevalence."

"The highest urban diarrhœa death-rate of 4·00 was returned from Gokak town and 2·80 from Dharwar. Pollution of rain water which constitutes the main source of drinking water is the chief cause of high mortality in Gokak town.

The cause of high mortality in Dharwar town was the pollution of water in Kelgeri Tank from which water is supplied to the town by service pipes, and that of Moti Talao water from which is also used for drinking purposes by the people round about the tank."

"A Report on the special investigation into the prevalence of intestinal diseases in Dharwar town with recommendations in general on the subject and improvements on the water-supply of the town in particular were forwarded to the Collector and the President of the Dharwar Municipality."

Plague

47. The recrudescence of plague in the Presidency reveals a somewhat favourable situation this year as the curve of mortality resumed a slightly lower trend as compared with last year. During the year under report 9,866 deaths were registered equal to a death-rate of ·51, as contrasted with 12,601 and a death-rate of ·66.

The total number of deaths recorded in each year since 1903 is given below :—

Year	Number of deaths	Year	Number of deaths	Year	Number of deaths
1903 ..	281,269	1911 ..	100,399	1919 ..	9,626
1904 ..	223,957	1912 ..	28,984	1920 ..	13,857
1905 ..	71,363	1913 ..	25,288	1921 ..	4,672
1906 ..	51,525	1914 ..	20,060	1922 ..	8,379
1907 ..	93,609	1915 ..	43,824	1923 ..	33,741
1908 ..	27,345	1916 ..	79,507	1924 ..	9,214
1909 ..	24,316	1917 ..	162,874	1925 ..	12,601
1910 ..	25,043	1918 ..	79,478	1926 ..	9,866

The distribution of plague given in detail in Annual Form No. XII shows that the chief areas of mortality are the same as in recent years, *viz.*, Dharwar, Satara and East Khandesh Districts with milder epidemics in Belgaum, Bijapur and Kanara.

Other districts in the Deccan were only slightly infected while Guzerat and Sind (with the usual exception of Karachi City) escaped entirely. In the Dharwar District the epidemic prevailed throughout the year as in 1925 and the maximum number of deaths was recorded in January. In Bijapur District the epidemic also prevailed throughout the year as in the case of Dharwar, but the maximum mortality occurred in February. In the East Khandesh District though the maximum mortality was reached in February, the District was free during the months of June, July and August.

The chief preventive measure relied upon was inoculation. Special inoculators were appointed at the outbreak of an epidemic to supplement the Medical Officers of dispensaries, and private practitioners.

Routine ratting operations were carried on throughout the year by the Municipalities of Belgaum, Nipani, Sholapur, Pandharpur, Panchgani, Malegaon, Dhulia, Karachi, Hyderabad, Larkana, Mirpurkhas and Tando Adam, and for shorter periods in many other towns.

Systematic evacuation is rarely practised in these days, except in a few small towns and some villages.

Details of various outbreaks are as follows :—

In Dharwar District 3,969 deaths were recorded against 3,733 in the preceding year. The death-rate was 3·83 against 3·60 in 1925. The epidemic prevailed throughout the year. Among the Talukas, Nargund, Gadag and Ron were free while Karajgi, Bankapur, Kod and Ranebennur suffered heavily, the death-rates returned being 9·22, 9·88, 8·82 and 5·49. Among the towns, Hubli was the worst affected with 147 deaths or a death-rate of 2·13. Dharwar, Gadag, Ranebennur reported 84,103, and 71 deaths respectively. Out of 18 registration circles and 1,277 villages, 16 circles and 277 villages

reported deaths. Navalgund town was quite free. It enjoyed complete immunity during the previous year also.

During the year 4 S.M.S. Officers (2 from January to May, and 2 from September to December) were engaged for inoculation work. They performed 9,361 inoculations in 62 villages. They visited all the infected areas of the district and explained the advantages of inoculation to the villagers who were assembled there.

In Bijapur District, 805 deaths were recorded against 686 in the previous year. The death-rate was 1·01 against ·86 in 1925. Sindgi, Indi and Bijapur Talukas reported 342,173 and 108 deaths. Bagalkot, Guledgud and Ilkal towns were quite immune while Bijapur town reported 117 deaths.

In Belgaum District, 715 deaths were recorded against 626 in 1925. The death-rate was ·75 against ·66 in 1925. Belgaum, Gokak and Hukeri Talukas reported 232,107 and 99 deaths respectively. Among the towns, Belgaum recorded 107 deaths and Gokak 8. Out of 15 registration circles and 1,069 villages, 11 circles and 56 villages reported deaths. The highest incidence was recorded during February (128 deaths). Khanapur, Chikodi, Parasgad Talukas and Athni and Nipani towns enjoyed complete immunity.

In Kanara District 143 deaths were registered against 78 in 1925. The death-rate was ·36 against ·19 in the preceding year. Haliyal and Mundgod bordering on the worst affected areas of Dharwar District were affected. Haliyal Taluka suffered heavily (131 deaths).

In Central Registration District, 2,593 deaths were recorded against 4,449 in 1925. Out of these Satara District was the chief area of mortality—returned 2,450 deaths against 3,292 in 1925. The epidemic prevailed throughout the year. The highest incidence was recorded in September (491 deaths). Karad was the worst affected Taluka, 1,547 deaths occurring in 50 villages, the highest number of deaths (313) were recorded in September. Cases were reported throughout the year. Karad town carried over infection from last year and returned 27 deaths. Walwa Taluka recorded 94 deaths in 10 villages, 14 villages in Shirala Peta were affected and returned 394 deaths. Khanapur Taluka returned 30 deaths. The towns of Satara, Wai, Ashta and Islampur escaped entirely.

During the year 2 S.M.S. Officers (one from January to April and the other from September to December) were engaged for inoculation work. They performed 1,870 inoculations in 40 villages. They visited all the infected areas of the district and explained the advantages of inoculation to the villagers who were assembled there.

In Sholapur District, 23 deaths were recorded in 2 towns and 2 villages against 620 in 1925. The death-rate was ·03 against ·84 in the previous year. Sholapur town returned 7 deaths against 522 in 1925. Out of these, two cases were imported from Gulbargha.

The Medical Officer of Health, Sholapur, reports :—

" It is indeed fortunate that beyond a few imported and scattered cases, no outbreak of a serious nature resulted during the year, notwithstanding the great risks of infection which followed upon the influx of many plague refugees from Bijapur and Gulbarga.

Pandharpur town contributed five deaths. In July two cases were imported from His Exalted Highness The Nizam's Dominions and one in November from Bijapur. Honmurgi in Sholapur Taluka reported nine deaths.

In Ratnagiri District 64 deaths were recorded against 377 in 1925 and three villages of Dapoli Taluka were affected. The district was free from July. The highest incidence was recorded in May (45 deaths).

In Ahmednagar District 55 deaths were recorded against 152 in 1925. The death-rate was ·08 against ·21 in the preceding year. Sheogaon Taluka returned 53 deaths. In all seven villages were infected. Nagar town was quite immune.

With the exception of one death in February, Poona District escaped entirely. Poona City enjoyed complete immunity.

In Western Registration District, 1,556 deaths were recorded against 2,802 in 1925. East Khandesh District suffered heavily—1,304 deaths were recorded against 2,550 in 1925. The death-rate was 1·21 against 2·37 in the previous year. Out of 23 registration circles and 1,478 villages, 14 circles and 72 villages were affected. Jamner and Pachora Talukas were the worst affected—592 and 133 deaths. Bhadgaon, Parola, Jalgaon and Chalisgaon Talukas registered 56, 71, 59 and 57 deaths respectively. Parola, Nasirabad, Yawal and Jalgaon towns contributed 185, 54, 47 and 41 deaths. The towns of Dharangaon, Erandol, Chalisgaon, Chopda and Bhusawal enjoyed complete immunity.

In West Khandesh District, nine deaths were recorded against 31 in 1925. The infection was chiefly confined to two villages of Dhulia Taluka. Dhulia and Nandurbar towns escaped entirely.

In Thana District, 95 deaths were recorded against 168 in 1925. The death-rate was ·13 against ·22 in the previous year. The district was affected from January to May and the infection appeared again in August and Septebmer. Bhiwandi town contributed 26 deaths.

Nasik District was practically free from plague with the exception of three deaths in Nasik City and one death in Nandgaon Taluka. The cases occurred during the months of January, May and June.

In the Bombay Suburban District, 32 deaths were recorded against five in 1925. Out of these, Kurla town contributed 28 deaths. Bandra town enjoyed entire immunity.

In Kolaba District, 112 deaths were recorded against 46 in 1925. The disease prevailed from February to December. Uran and Panwel Talukas contributed 40 and 34 deaths respectively. Panwel town recorded 24 deaths and Uran 12. Nine villages were affected.

In Bombay City, 56 deaths were recorded against 174 in 1925. The death-rate was ·05 against ·15 in the previous year.

Ratting Operations.—579,806 rats were caught and destroyed, 283,500 were examined and 1,286 found to be plague infected. The daily average number of traps issued was 500.

In Sind Registration District, 27 deaths were recorded against 50 in 1925. All of these were registered against Karachi City. The disease was prevalent from February to August. The highest incidence was recorded in June (13 deaths). The first case was noticed in Machi Miani quarter where dead rats were found in a house.

Rat traps from the stock in use during the Belgaum and Dharwar Operations were sold or lent to local bodies as a preventive measure.

48. The total number of persons inoculated during the year under report was 84,900 as compared with 60,831 in the previous year. Out of these, 74,874 were performed in British Territory and 10,026 in Native States.

The total number of persons inoculated in each year since 1914 is given below :—

Year	No.	Year	No.	Year	No.
1914 ..	62,497	1919 ..	28,307	1923 ..	145,395
1915 ..	128,800	1920 ..	49,117	1924 ..	60,327
1916 ..	211,907	1921 ..	39,208	1925 ..	60,831
1917 ..	241,139	1922 ..	73,098	1926 ..	84,900
1918 ..	36,571				

During the year under report 53 cases of plague amongst persons inoculated were reported of which 22 died. Out of these 53 cases, 18 were attacked within 10 days of incubation.

By districts, the number of operations was 41,999 in Dharwar ; 17,378 in Bijapur ; 6,183 in Belgaum ; 2 ,100 in Satara ; 1,851 in Kanara ; 1,630 in East Khandesh ; 1,328 in Kolaba. In the towns of Belgaum Dharwar, Hubli, Bijapur, Karachi and Parola 6,183, 4,263, 8,324, 3,527, 1,631 and 1,002 inoculations were performed respectively and in Bombay City 400. In Bijapur Prison 967 inoculations were performed.

Small-pox

49. Three thousand nine hundred and twenty-two deaths from Small-pox (2,005 males and 1,917 females) were registered against 5,644 in 1925 and 4,510 the quinquennial mean. The death-rate was 0·20 against 0·29 in 1925 and 0·23 the quinquennial mean.

The annual mortality for previous years is given below :—

Year	No. of deaths	Year	No. of deaths
1901-1910 mean ..	4,962	1923	2,811
1911-1920 mean ..	5,074	1924	11,152
1921	1,771	1925	5,644
1922	1,170	1926	3,922

Distribution.—Detailed figures are given in Annual Form No. VIII.

While all the Collectorates were infected, the following suffered heavily : Surat reported 770 deaths or a ratio of (1·14), Karachi 352 (0·66), Kanara 185 (0·46), Larkana 275 (0·46), Thar and Parkar 180 (0·45), Nawabshah 159 (0·38), East Khandesh 250 (0·23), Panch Mahals 83 (0·22) and Ratnagiri 238 (0·21). In Bombay City 476 deaths were registered equal to a ratio of 0·41 against 565 and 0·49 respectively in 1925.

Two hundred and twenty-five Registration Circles with 834 villages were infected.

The highest urban death-rates were recorded in Surat (5·46), Yeola (2·23), Rander (1·90), Kambar (1·84), Dhandhuka (1·61), Honawar (1·56), Malegaon (1·43), Tatta (1·42), Viramgaon (1·41) and Guledgud (1·08).

Of the 3,922 deaths from Small-pox, 963 were of infants under one year and 1,715 of children between one and ten years of age.

Eighty-two per cent. of the mortality occurred during the first six months of the year, May recording the maximum mortality. Small-pox year normally begins about October-November, reaches its maximum in March or April, and then declines.

50. The following is a short summary for each Registration District :—

The heaviest incidence occurred in Sind Registration District with 1,143 deaths while Guzerat returned 971 deaths, Western 495, Central 427 and Southern 410, as compared in that order with 1,228, 850, 859, 1,272 and 870 in 1925.

Sind.—In all 5,922 cases with 1,143 deaths were reported, against 5,517 cases and 1,228 deaths in 1925. All the districts were affected, the worst sufferer being Karachi with 352 deaths. Of 1,143 deaths from small-pox, 178 were among infants under one year, 373 between one and ten years and the remaining 592 above 10 years. Of 5,134 towns and villages in Sind, 303 towns and villages were affected by Small-pox. In the rural districts (excluding town circles) highest death-rate was recorded, *viz.*, 0·83 in Karachi and the lowest ·07 in Upper Sind Frontier. In Karachi City small-pox was prevalent throughout the year. In all 241 cases resulting in 80 deaths were recorded during the year under report as against 231 cases and 56 deaths in 1925. On enquiry the Health Officer, Karachi Municipality, reported that though vaccination was compulsory in the city, the prevalence of small-pox in epidemic form was much too frequent. He accounted for it by saying that Karachi City had to suffer for its geographical situation, it being a large and important sea-port and in constant communication with other cities and towns and closely approachable by land and sea, people from various parts of India come to Karachi from places where vaccination was not compulsory with the result that unprotected and susceptible children came to Karachi and helped in spreading in the infection.

Personally I cannot accept this explanation. If the Municipal Health Department were to use the powers they possess under the Compulsory Vaccination Act and exercise proper vigilence in tracing unprotected children and early cases of small-pox and isolate the latter, these frequent outbreaks of small-pox in Karachi would soon cease.

In Hyderabad town, small-pox broke out on 17th January and continued till 16th October 1926. In all 99 cases with 51 deaths were reported during the year against 24 cases with 12 deaths in 1925.

In the Central Registration District, small-pox was severe in Ratnagiri Collectorate. Out of 79 registration circles of this Registration District, 47 were affected against 57 in last year. 142 towns and villages reported deaths. In Ratnagiri District, 2,545 cases and 238 deaths were reported from 72 villages. In many cases the source of infection was from Bombay.

In the Guzerat Registration District, 2,077 attacks and 971 deaths were reported against 2,531 and 850 in the previous year. In Surat District, all the rural and town circles were affected. Out of the district total of 770, Surat town alone was responsible for 641 deaths.

In Broach District, four out of six rural cirlces were infected and returned 22 deaths. Amongst towns only Broach reported one death. Infection in Kaira District resulted in only three deaths. In Panch Mahals District all the rural and town circles were infected and reported 83 deaths.

Ahmedabad District reported only 92 deaths against 326 in 1925. Ahmedabad City and Dhandhuka and Viramgaon towns were responsible for 19, 13 and 37 deaths, respectively.

In the Western Registration District, 495 deaths were recorded against 859 in 1925 and 1,517 the mean of the previous five years. East Khandesh and Nasik Collectorates reported 250 and 102 deaths, respectively as compared with 315 and 38 in 1925. Of the 495 deaths, 137 were under one year and 280 between one and ten years of age. The infection in West Khandesh, Thana, Bombay Suburban and Kolaba Districts was mild. Vaccination campaigns were carried out in several affected places.

The Bombay District Vaccination Act has been introduced into the Municipal District of Bhusawal, during the year under report.

In the Southern Registration District, 3,121 attacks and 410 deaths were reported against 7,391 attacks and 870 deaths in 1925. Kanara was the worst affected Collectorate in the whole Division, 1,082 cases and 185 deaths having been recorded. All rural circles except Yellapur, Haliyal and Supa were infected. Honawar and Karwar suffered heavily recording 107 (2·02) and 36 (0·81) deaths respectively. In Belgaum District all rural circles and Belgaum town were affected. Belgaum

town reported 6 deaths only ; Khanapur and Gokak rural circles returned highest mortality of 37 and 32 deaths, respectively.

In Dharwar District, all rural circles except Mundargi, Karajgi, Ron, Kalghatgi, Ranebennur and Kod were affected. Gadag rural circle returned 9 deaths, while Gadag town reported 4 deaths. Except Muddebihal, all rural circles of the Bijapur District were affected, 16 and 12 were the highest number of deaths recorded in Bilgi and Indi rural circles, respectively. Guledgud town returned 16 deaths and Ilkal one death.

51. In accordance with Government Resolution, General Department, No. P.—61, dated the 29th January 1926, the following short summary of small-pox cases treated at the various hospitals in the Presidency is given. In all 75 cases were treated at the Civil Hospitals and Epidemic Diseases Hospitals, during the year under report. Of these 14 were vaccinated, 3 stated to have been vaccinated but no vaccination cicatrix was present. 56 were unvaccinated, one vaccinated during the incubation period and one successfully revaccinated. The majority of these unvaccinated is chiefly in Sind, next comes Surat. In other districts, people do not appear to have taken advantage of these hospitals.

Sixty-two cases were treated at the Epidemic Diseases Hospital, Karachi. Out of these 35 were vaccinated and 27 unvaccinated. Among the 35 vaccinated, 2 were unsuccessful, 3 had only one mark each visible and the rest had more than one mark. Total mortality amongst all the small-pox cases admitted in the hospital was 14. Out of these 14 deaths, 9 were unvaccinated, 1 was vaccinated but without any mark, 2 had only one mark and the remaining 2 had 4 good marks each but one of these died as a result of a complication. Out of the 9 deaths amongst the unvaccinated, 3 had hæmorrhagic and 6 confluent type of the disease.

Injuries

52. There were 7,672 deaths recorded from injuries of which 4,338 were among males and 3,334 among females. The number registered in 1925 was 7,754 while the quinquennial mean was 7,668 as will be seen from the following table :—

Year	Number of deaths
1901-1910 mean	6,879
1911-1920 mean	7,725
1921	7,888
1922	7,810
1923	7,514
1924	7,374
1925	7,754
1926	7,672

Further comparisons arranged under the various heads are set forth in the following table :—

	1926			1925		
	Male	Female	Total	Male	Female	Total
Drowning	1,160	1,563	2,723	1,154	1,715	2,869
Poisoning	135	43	178	111	48	159
Hanging	186	79	265	186	82	268
Wounding	1,090	507	1,597	1,053	472	1,525
Wild-beasts	40	19	59	39	11	50
Snake-bite	888	533	1,421	903	484	1,387
Rabies	151	83	234	182	88	270
Railway Accidents ..	100	17	117	117	26	143
Other Causes	588	490	1,078	623	460	1,083
Total ..	4,338	3,334	7,672	4,368	3,386	7,754

Snake-bite deaths.—One thousand four hundred and twenty-one deaths were attributed to snake-bite against 1,387 in 1925. The highest number occurred in Ratnagiri District, *viz.*, 321. Next in order were Thana 136, Satara 102, Ahmedabad 77 and Kolaba 72, while Bombay City reported only 2. Ratnagiri, Thana and Satara also headed the list last year. In the Southern Registration District, there were 111 deaths from snake-bite ; of these 71 were among males and 41 among females. Ninety-seven deaths were enquired into ; in 36 cases the snake was identified as a cobra and in these the interval between the bite and death varied from half an hour to 17 hours. In Guzerat Registration District 235 deaths from snake-bite were reported. Of these 107 deaths were caused by " black serpent, " 29 by " Cobras " and 99 by others, unidentified. The interval between bite and death varied from a few minutes to 48 hours in the case of " black serpents " and from a few minutes to 24 hours in the case of Cobras.

Rabies.—Two hundred and thirty-four deaths were reported under this head against 270 in the previous year. Ahmedabad District recorded the highest number 29, Dharwar 28, Kaira 23, East Khandesh 19, Ahmednagar 16 and Poona 16. Surat and Ahmedabad cities reported 7 and 6 deaths, respectively.

In the Southern Registration District, out of the total number of 1,379 deaths from injuries, there were 120 deaths under " Murder ". Belgaum District recorded 35, Dharwar 37, Bijapur 28 and Kanara 10.

Deaths by suicide continue to increase. The total is 645 (394 males and 251 females) against 595 (350 males and 245 females) in 1925 and

550 in the previous year. Details for the districts returning the highest number are as follows:—

District	Drowning	Poisoning	Hanging	Wounding	Railway	Total
Bombay City ..	7	66	9	14	..	96
Dharwar	11	2	46	..	..	59
Belgaum	14	3	30	1	..	48
Bijapur	5	1	37	..	..	43
Thana	11	2	25	1	..	39
Kaira	16	8	11	..	..	35
Poona	10	19	3	..	1	33

Other Causes

53. Under this heading deaths from a variety of causes—debility, old age, rheumatism, chronic cases belonging properly to one or other of the tabulated headings and deaths from diseases common in occurrence but beyond the ken of the village registrar, *i.e.*, all deaths which cannot be classed under the tabulated headings are included under this heading.

It covers ordinarily about one-fourth of the total deaths and in numerical importance in the mortality tables, therefore, comes second to "Fevers" than which it is subject to less variation. For both the reasons it presents one of the realiable indices, to the general health of the community.

One hundred and sixty-six thousand and sixty-nine deaths (84,079 males and 81,990 females) were registered as compared with 140,053 in 1925 and a quinquennial mean of 140,847. The death-rate was 8·67 against 7·31 in 1925 and a quinquennial mean of 7·35.

So great a variation from the mean—increase of 18 per cent.—is unusual under this head. Ill-defined causes of death such as convulsions, debility, old age, etc., that apply mostly to the very young and the aged are included under "Other Causes" and it has been shown (paragraph 30) that the increase in mortality for the year affected those age-periods.

The annual mortality for previous years is as follows:—

Year	Number of deaths	Ratio of mille
1901-1910 mean	140,618	7·61
1911-1915 mean	144,911	7·40
1916-1920 mean	164,773	8·41
1921	134,263	7·01
1922	130,766	6·82
1923	140,154	7·31
1924	159,008	8·30
1925	140,053	7·31
1926	166,069	8·67

It will be seen from the above table that the mortality under this head is higher than the previous averages of 1901-10, 1911-15 and 1916-20.

54. Deaths from child-birth—one of the sub-heads of " Other Causes " shows an increase from 3,502 to 4,392. For the Western, Central, Southern, Guzerat and Sind Registration districts the total deaths were 909, 845, 842, 561 and 1,092, respectively compared with 621, 731, 782, 414 and 840 in 1925. In Bombay City 143 deaths were recorded during the year against 114 in 1925. The increase was shared by all the Registration Districts, Western and Sind being the highest, as compared with the preceding year.

Taking the Presidency as a whole one woman was reported as having died as the result of child bearing to every 162 live-births as compared with one per 190 in 1925. The urban and rural figures were one per 85 and 193 respectively against 111 and 218 in the preceding year.

Among Collectorates, the toll of life exacted by child-birth still continues to be highest in Kanara where one mother died for every 47 births registered as compared with 46 in the previous year. The maternal mortality rates for other Collectorates of the Southern Registration District were Dharwar 1 to 152, Belgaum 1 to 228, and Bijapur 1 to 272. Elsewhere the following districts show high rates: Thana 1 to 77 births, Poona 1 to 152, Kolaba 1 to 184 and Ratnagiri 1 to 205. The Sind rates are still higher, *e.g.*, Hyderabad 1 to 64 births, Nawabshah 1 to 65, Thar and Parkar 1 to 70, Sukkur 1 to 74, Larkana 1 to 75, Karachi 1 to 77 and Upper Sind Frontier 1 to 101 births. Sind towns continue to show extreme rates, for example, Larkana one maternal death in every 30 births, Shikarpur one in every 31, Sukkur one in every 52, Karachi one in every 85 and Hyderabad one in every 90 births. In Hyderabad and Karachi there has been an unaccountable increase in maternal deaths. It is however becoming noticeable that all the towns in Upper Sind are showing an improvement in the maternal mortality. This improvement can safely be attributed to the child and maternity welfare movement which has made considerable progress in Upper Sind recently mainly through the efforts of the Women's Health Education Society and to Mrs. Hamid Ali Maternity Home. Maternity service has considerably improved in Upper Sind and trained nurses are gradually being introduced into villages where the untrained Dai had a free-hand so far. The popularity of the Shikarpur Maternity Home mentioned in last year's report has steadily increased and excellent work is being turned out in spite of many difficulties. The " Mrs. Hamid Ali Maternity Home " has also enlarged its activities and is doing able and efficient work.

I visited Mrs. Hamid Ali Maternity Home at Larkana and Miss Piggott's Institution for training Dais in Hyderabad during my tour in Sind last March, and was greatly impressed by the good work which was being done at these Institutions.

It is gratifying to note that the good work of which Mrs. Hamid Ali and her co-workers showed the seeds in Upper Sind is bearing fruit already.

In Bombay City one mother died for every 145 births. Amongst towns Poona City shows a figure of 31, Ahmednagar 40, Ahmedabad 48, Surat 53, Nasik 66 and Nadiad 76.

55. The number of deaths from the chief causes for each Collectorate, by months, are shown in Annual Forms Nos. VII to XII.

Sections VII and VIII—No remarks

SECTION IX

Sanitary Works—Civil

Municipalities

56. The creation of Bhagur Municipality in Nasik District raised the number of municipalities (excluding Bombay City) to 156 with a total population of 2,677,507. Their aggregate income exclusive of opening balance amounted to Rs. 31,916,845 of which Rs. 15,309,561 or 48 per cent. was raised by taxation giving an incidence per head of population of Rs. 5-11-6 which is an increase of four annas per head as compared with the previous year. Taxation varied between Rs. 14-13-3 in Karachi City to Re. 0-9-10 in the small Municipality at Ashta in Satara District. The figures include the special conservancy cess in the case of many municipalities.

The incidence of municipal income and taxation per head of population in the larger municipalities is as follows :—

	Income	Taxation
	Rs.	Rs.
Bombay	26	23
Karachi	23	15
Ahmedabad	11	9
Poona	11	7
Surat	8	7
Sholapur	7	5

The expenditure on public health measures came to Rs. 10 per head of population in Karachi City and averaged Rs. 3 for all remaining municipalities.

The following statement shows the birth and death rates among the municipal population in each district. Out of 156 municipal towns, 28 suffered from small-pox, 19 from plague and 2 from influenza. Cholera was almost entirely absent.

In ten Revenue districts, as compared with 4 in 1925 the municipal death-rate exceeded 30 per 1,000 of population. Comment on death-rates in principal towns has already been given in paragraph 19.

Statement showing by districts combined birth and death rates for Municipalities in the Bombay Presidency during the year 1926.

District	Number of Municipalities	Ratio of births per 1,000 of population	Ratio of deaths per 1,000 of population				
			Cholera	Small-pox	Plague	In-fluenza	All causes
Ahmedabad ..	9	41·78	..	·20	..	..	49·10
Kaira	8	40·69	..	..	..	..	40·57
Panch Mahals ..	2	42·19	..	·19	..	..	31·34
Broach	3	44·37	..	·02	..	..	37·39
Surat	3	35·48	..	4·52	·01	·06	43·70
Thana	4	24·66	..	·02	·07	·02	22·38
East Khandesh ..	12	31·13	·01	·01	1·62	·01	26·07
West Khandesh ..	7	37·55	..	·01	..	..	26·07
Nasik	8	27·38	..	..	·03	..	29·79
Ahmednagar ..	3	27·53	..	·06	..	..	18·22
Poona	11	21·36	..	·25	..	..	37·57
Satara	12	26·73	·01	·01	·28	..	23·16
Sholapur	5	41·36	·02	·06	·07	..	37·36
Belgaum	6	32·52	..	·07	1·22	..	25·31
Dharwar	10	32·56	..	·04	2·24	..	27·26
Bijapur	4	38·24	..	·22	1·49	..	31·35
Kanara	8	27·94	..	·21	·74	..	22·78
Kolaba	7	19·65	..	..	1·60	..	21·16
Ratnagiri	4	31·91	..	·05	..	..	20·80
Karachi	5	44·82	..	·43	·12	·04	32·87
Hyderabad ..	6	38·63	..	·59	..	·09	36·76
Larkana	5	36·41	..	·52	..	..	28·25
Thar and Parkar ..	2	17·16	..	..	..	..	24·89
Nawabshah ..	2	20·87	..	·22	..	..	13·86
Sukkur	5	33·86	..	·09	..	..	18·19
Upper Sind Frontier ..	1	19·85	..	..	..	..	15·32
Bombay Suburban ..	4	19·58	..	·14	·44	..	22·56

57. The Assistant Directors of Public Health in the course of their regular tours and special visits make a point of conferring with the Councillors of Local Bodies or their officers on matters that concern public health.

During the year complete sanitary surveys of 12 towns were made and inspections or reports were made in the case of 105. Advice was given in all these and in numerous other cases in matters of water-supply, conservancy, prevention of spread of disease and in measures of a more general nature. Action was taken by many of the municipalities on

the suggestions of the Assistant Directors of which the following is a brief summary.

Bhusaval constructed new gutters and two night-soil depôts and built a fly-proof beef market and a slaughter house.

Dhulia constructed new gutters and latrines and almost completed the western collecting under ground drain.

Bandra purchased two motor lorries for conservancy service and constructed a new maternity ward and mortuary and additional out-houses for the municipal hospital.

Kalyan purchased auto-sprays and six night-soil carts.

Ahmedabad constructed covered storm water drains, new latrines and urinals and built a new vegetable market.

Dholka appointed a qualified Sanitary Inspector.

Broach spent Rs. 6,700 on setting machines and boring wells and the annual working expenses come to Rs. 5,400.

Bijapur constructed new gutters and latrines and paved the Devatgiri Nalla.

Gadag purchased night-soil carts and constructed new wells and public latrines.

Hyderabad constructed drains, urinals and public latrines.

Surat, Nadiad and Malegaon constructed latrines and urinals.

Jalgaon, Chalisgaon, Bagalkote constructed gutters and latrines.

Godhra, Dakore, Erandol, Sinnar, Alibag constructed new latrines.

Raver, Haliyal constructed new gutters.

Kurla, Larkana constructed drains.

Nasik constructed waste water drains and urinals.

Dharwar and Athani adopted the Nasik system of trenching night-soil.

Guledgudd acquired land for a night-soil depôt and constructed latrines and gutters.

Out of 25 municipalities in Gujerat 11 have adopted the Nasik system of trenching night-soil and it has proved a great success in Nadiad, the Municipality having realised Rs. 1,646 from the sale of poudrette against Rs. 957 in the previous year. Dohad realised Rs. 110, Broach Rs. 75 and Viramgam Rs. 55.

The Sukkur Barrage night-soil depôt has, under the direction of the Assistant Director of Public Health become a model of the Nasik System.

I visited the depôt during my inspection of Sukkur last March and was greatly impressed with its efficient management. Another well run depôt is the one at Belgaum, which I saw last April.

This system of disposal was first introduced in Nasik by Major (now Lieutenant-Colonel retired) Marjoribanks about seventeen years ago. In 1914, I recommended its adoption in Surat and Dr. Pinto (now Assistant

Director of Public Health, Southern Registration District) who was Medical Officer of Health at the time devoted considerable attention to starting the depôt on the Nasik system and on its subsequent working. He introduced a modification of the original system by spreading a layer of ash over the night-soil before spreading *katchara* over it. The ash served as a deodarant, minimised the amount of *katchara* required, and enhanced the manurial value. This depôt in Surat proved a great success. I have seen the Nasik system working now for about thirteen years in different climates and with different soils, ranging from Sukkur to Belgaum, and not in a single place have I known it to fail, if managed properly. The freedom from smell, freedom from flies, production of poudrette of high manurial value are features of this system which are now fairly well recognised, but what the local authorities do not yet realize is the economic gain derived by its adoption. A Nasik system depôt being innocuous can be located fairly near the inhabited area and this effects a saving in cartage; besides, by preventing facilities for *Bhangees* to scamp work, it provides for more efficient conservancy. Another gain to be obtained is by the sale of manure. It is true that some municipalities do realize a few hundred rupees by the sale of poudrette but if the total output of night-soil were removed to the depôt (it has been estimated that only about 60 per cent. of night-soil gets to a depôt in a well conserved town and the figure falls to 10 per cent. in a badly conserved one), and the poudrette properly advertised, these local bodies would multiply the sale proceeds from manure considerably. In India we deal with a population 75 per cent. of which is made up of agriculturists, and if the use of this poudrette is popularised among them the Nasik system would serve to benefit the cultivator, and improve the finances of local bodies, besides improving public health.

The Nasik system is capable of adoption in any village and is particularly suited for rural areas where land is plentiful. The only circumstance where it cannot be adopted is where sufficient land is not available. For such places, "Fowler's method" of disposal of night-soil provides a most efficient alternative. The technique consists of rapidly mixing night-soil and *katchara* on a masonry platform, with a mechanical rake. The poudrette matures in a few weeks and is of high manurial value. I have had experiments conducted with this method under Dr. Gilbert J. Fowler's personal supervision in several places and can testify to its efficacy.

58. *Municipal Health Staff.*—During the year under report fully qualified Medical Officers of Health were employed in Karachi, Hyderabad, Ahmedabad, Surat, Poona and Sholapur. In Karachi and Ahmedabad qualified Deputy Health Officers were also entertained. Dhulia, a second class municipal town, employed a Medical Officer of Health possessing the qualifications required for a first class town. Medical Officers of Health holding the degree of the Bombay University in addition to the Sanitary Inspector's certificate were employed at Bandra and Bijapur. Nasik had a Medical Officer of Health possessing the qualifications of one for a second class town, while Dakore and Nadiad

employed Licentiates of the College of Physicians and Surgeons holding Sanitary Inspector 's certificates.

Dr. T. R. Gune, L.M. &.S., continued to hold charge at Pandharpur.

Seventy-six qualified Sanitary Inspectors were employed in 35 towns as compared with 78 and 36 respectively in 1925. Ahmedabad 15; Poona 8; Sholapur 6; Surat 6; Karachi 3; Nasik 3; Ahmednagar, Pandharpur, Gadag, Bijapur, Hubli, Sukkur, Hyderabad 2 each; and the following 1 each—Kalyan, Bandra, Malegaon, Igatpuri, Trimbak, Thana, Dhulia, Jalgaon, Bhusaval, Chopda, Amalner, Kurla, Barsi, Panchgani, Belgaum, Bagalkot, Viramgam, Larkana, Tando Adam, and Rohri.

59. *Training of Sanitary Officers.*—Seventy-five new students were on the class roll, 56 of whom together with 26 students from previous classes made up the total of 82 that appeared for the Sanitary Inspectors' examination. Of these twenty-eight passed the examination and obtained the certificate of the Royal Sanitary Institute, London. Among the successful candidates were one medical graduate of the Bombay University and two L.C.P.S.

More advanced classes were held for medical men and at a further examination 3 out of 6 were passed as qualified to hold the post of Medical Officer of Health for a second class town.

60. *Local Sanitation by Dispensary Medical Officers.*—Thirty-eight Dispensary Medical Officers in Western Registration District, 5 in Central Registration District and 10 Gujerat Registration District gave advice to local bodies and assistance in public health matters. The Medical Officers at Modasa, Dholka and Sanand receive a small allowance of Rs. 5 to Rs. 10 from the municipality for such advice.

The Assistant Director of Public Health, Western Registration District, states that the scheme for Medical Officers in charge of Dispensaries giving advice to local authorities in public health matters was introduced in 1922.

In 1922 out of 64 Medical Officers in his Division 34 gave such advice, in 1923 out of 65 Medical Officers 38 took advantage of the privilege; in 1924 out of 65 Medical Officers 30 gave the benefit of their advice to local bodies; in 1925 out of 65 Medical Officers only 26 helped the local authorities in public health matters.

The increase in 1926 over 1925 in the Western Registration District is due to the circular issued by the Assistant Director to Civil Surgeons in his Division last year pointing out the fall in numbers since 1922 and the need for Medical Officers taking a more active interest in matters concerning the health of the areas under their charge.

As an Assistant Director of Public Health I have, at times, received most valuable assistance from Medical Officers of Taluka Dispensaries but with the majority of them the idea still prevails that prevention of disease or improvement of sanitation is beyond their concern.

The Medical Officer of a Taluka Head Quarter town has generally a varying amount of influence with the people and if he would only exert himself a little, his co-operation would go a long way in promoting public health interests.

I intend representing this to the Surgeon General and also directing the Assistant Directors to obtain the co-operation of Taluka Medical Officers through the Civil Surgeons of the different districts.

61. *Sanitary Board.*—Report published independently.

62. *Town Improvement Schemes.*—No town improvement schemes for which Government grants were given were completed during the year.

63. *Extension of Village Sites.*—Progress in this direction may be summarised as under :—

East Khandesh.—Two acres and 5 gunthas of land were acquired for the village of Chitoda, Yawal Taluka. Village planning was attended to.

West Khandesh.—Two acres and 8 gunthas of land were acquired for the village of Nardana, Taluka Sindkhed. Suitable plots have been laid out and will be given out shortly.

Bijapur.—Ten acres and 16 gunthas of land were acquired for general sanitary purposes.

Broach.—One acre and 3 gunthas of land were acquired in village Palej in Broach Taluka for the purpose of excavating a channel—a minor sanitary project. No town planning was attended to as the lands are for the purpose of a channel only.

64. *District and Taluka Local Boards.*—The aggregate income of the 27 District Local Boards and 222 Taluka Local Boards amounted to Rs. 20,442,276. Income and taxation per head of population were Rs. 1-4-4 and Re. 0-5-1 respectively against Rs. 1-1-6 and Re. 0-4-10 in 1925. A total sum of Rs. 2,789,645 was spent by these boards on communications while Rs. 819,662 were spent under the head of Public Health Works.

Under Government Resolution, General Department, No. 1570 of 3rd May 1926 the following grants were placed at the disposal of the Commissioners of Divisions for distribution among the District Local Boards of the Presidency and Sind. These grants are intended to be utilized primarily for expenditure on roads and bridges :—

	Rs.
Northern Division	4,55,000
Central Division	5,30,000
Southern Division	4,30,000
Sind	4,84,000

Under Government Resolution, Revenue Department, No. 5607-24 of 4th August 1926, the following grants were placed at the disposal

of Commissioners of Divisions for distribution among the District Local Boards of the Presidency and Sind for improvement of village water-supplies : Northern Division Rs. 128,000 ; Central Division Rs. 178,000 ; Southern Division Rs. 55,000 ; Sind Rs. 12,000 and Bombay Suburban Division Rs. 5,000. These grants were supplemented by allotments from Local Funds and popular contributions and were expended on constructing wells, tanks, troughs and cisterns, in repairing old wells and closing step-wells and in boring operations.

Six hundred and six draw-wells were constructed during the year of which 113 and 119 were in Sukkur and Surat districts respectively. Thirty-four step-wells were converted into draw-wells.

65. *Notified Areas.*—There were 23 Notified Area Committees working in the Presidency during the year under report as compared with 21 in the previous year (committees which had not commenced work are excluded).

The population served by these committees was 90,774 and the total income from revenue excluding opening balance came to Rs. 414,945 giving an incidence of income per head of Rs. 4-9-2. The following tables show the details of income and expenditure and the combined birth and death rates for Notified Areas in each district :—

Statement showing income and expenditure of the Notified Area Committees in the Bombay Presidency during the year 1926-27

Districts	Serial number	Names of towns and villages	Population	Income including opening balance	Expenditure	Closing balance
				Rs.	Rs.	Rs.
Bombay Suburban ..	1	Andheri ..	6,211	67,423	54,128	13,295
	2	Borivli ..	5,957	16,427	14,590	1,837
	3	Malad	8,520	30,270	26,476	3,794
	4	Santa Cruz ..	6,092	1,56,575	1,30,033	26,542
	5	Ville Parle ..	7,479	75,394	72,544	2,850
	6	Kandivli ..	3,444	14,433	10,774	3,659
	7	Ambarnath ..	3,255	4,977	782	4,195
Nasik	1	Manmad ..	7,260	35,913	18,996	16,917
Ratnagiri	1	Rajapur ..	6,361	26,286	25,978	308
	2	Khed	3,842	21,884	5,351	16,533
	3	Dapoli	2,689	11,650	6,611	5,039
Bijapur	1	Hungund ..	5,562	4,108	2,765	1,343
Sukkur	1	Koti Sultan ..	1,606	1,674	1,526	148
	2	Mirpur ..	1,680	1,949	1,629	320
	3	Ubarao	1,716	3,063	2,011	1,052
	4	Daharki ..	1,657	3,685	1,649	2,036

District	Serial No.	Names of Towns and Villages	Population	Income including opening balance	Expenditure	Closing balance
Nawabshah ..	1	Navsharo ..	3,400	2,755	2,750	5
	2	Kandiaro ..	3,013	2,126	1,415	711
Larkana	1	Mehar	2,746	15,680	10,892	4,788
	2	Khairpur Nathan Shah.	1,484	3,390	2,008	1,382
	3	Dadu	2,996	5,813	3,439	2,374
Hyderabad ..	1	Tando Jam ..	2,634	4,404	2,248	1,856
Poona	1	Talegaon Dabhade..	1,080	194	187	7
Total ..	23		90,774	5,09,773	3,98,782	1,10,991

Statement showing by districts combined birth and death rates for Notified Area Committees in the Bombay Presidency during the year 1926

District	Number of Notified area Committees	Ratio of births per 1,000 of population	Ratio of deaths per 1,000 of population				
			Cholera	Small-pox	Plague	Influenza	All causes
Bombay Suburban	7	12·09	..	·08	..	..	11·76
Nasik	1	18·11	..	..	..	..	11·96
Ratnagiri	3	31·18	..	·07	..	..	26·64
Bijapur	1	38·30	..	..	..	..	20·86
Sukkur	4	25·39	..	·76	..	..	32·77
Nawabshah	2	17·77	..	·46	..	..	21·05
Larkana	3	31·97	..	..	..	..	25·32
Hyderabad	1	29·57	..	..	..	..	22·39
Poona	1			Not available.			

No works of importance were carried out during the year except that the Andheri Notified Area and the Santa Cruz Notified Area replaced some of the cess-pool carts by motor lorries fitted with night-soil vans. Notified Area Committees at Dadu and Mehar in Larkana District made improvements to wells.

66. *Village Sanitary Boards.*—There are two Sanitary Boards working in the whole Presidency, *viz.*, one at Siddapur in Kanara District and the other at Mandal in Ahmedabad District. Their total income including

opening balance was Rs. 2,790 and expenditure amounted to Rs. 2,406 leaving a closing balance of Rs. 384.

67. *Sanitary Committees and Village Panchayats.*—During the year there were working in all 545 Sanitary Committees and Village Panchayats.

Details of income and expenditure and of birth and death rates for the population under their administration are given in the following tables :—

Statement showing by districts income and expenditure of Village Panchayats and Sanitary Committees in the Bombay Presidency during the year 1926-27

District	Number of village Panchayats and Sanitary Committees	Total income including opening balance	Popular contribution	Total expenditure	Closing balance
Ahmedabad	2	6,805	2,176	6,118	687
Kaira	27	46,372	14,063	22,808	23,564
Panch Mahals	4	2,477	525	2,098	379
Broach	16	32,005	5,073	20,498	11,507
Surat	15	19,479	7,222	13,737	5,742
Thana	34	45,899	23,921	32,704	13,195
Total, Northern Division ..	98	1,53,037	52,980	97,963	55,074
East Khandesh	30	1,82,545	....	1,18,483	64,062
West Khandesh	13	33,715	11,115	17,335	16,380
Nasik	27	75,187	7,947	37,217	37,970
Ahmednagar	18	44,343	13,598	27,461	6,882*
Poona	16	29,734	5,078	17,069	12,665
Satara	22	11,432	4,737	7,997	3,435
Sholapur	8	8,384	....	6,762	1,622
Total, Central Division ..	134	385,340	42,475	232,324	153,016
Belgaum	Information not received			....	....
Dharwar	47	14,933	4,955	6,658	8,275
Bijapur	22	30,230	7,500	17,473	12,757
Kolaba	24	17,902	1,326	10,369	7,533
Ratnagiri	5	2,909	851	1,590	1,319
Total, Southern Division ..	98	65,974	14,632	36,090	29,884

* Information not complete.

District	Number of Village Panchayats and Sanitary Committees	Total income including opening balance	Popular contribution	Total expenditure	Closing balance
Karachi	42	42,697	6,878	18,874	23,823
Hyderabad	43	47,419	8,604	22,755	24,664
Larkana	47	37,681	9,922	21,819	15,862
Thar and Parkar	26	36,708	7,484	19,057	17,651
Nawabshah	27	43,543	8,069	22,926	20,617
Sukkur	17	19,445	4,800	10,904	8,541
Upper Sind Frontier	12	23,072	5,921	15,253	8,419
Total for Sind ..	214	2,51,165	51,678	1,31,588	1,19,577
Bombay Suburban	1	5,365	3,683	3,460	1,905
Grand Total ..	545	869,884	165,448	501,425	359,456

Statement showing by district combined birth and death rates for Village Panchayats and Sanitary Committees in the Bombay Presidency during the year 1926

District	Number of Village Panchayats and Sanitary Committees	Ratio of births per 1,000 of population	Ratio of deaths per 1,000 of population				
			Cholera	Small-pox	Plague	Influenza	All causes
Ahmedabad ..	2	35·40	..	..	..	..	23·62
Kaira	27	36·56	..	..	..	..	23·05
Panch Mahals ..	4	43·32	..	1·95	..	·14	44·11
Broach	16	38·05	..	..	..	..	35·57
Surat	15	41·20	..	·12	..	..	31·39
Thana	34	28·52	..	·09	·27	..	18·00
East Khandesh ..	30	45·22	..	·41	3·02	..	38·42
West Khandesh ..	13	46·88	..	·03	..	..	30·28
Nasik	27	48·24	..	..	..	..	33·14
Ahmednagar ..	..	30·30	..	..	..	..	19·34
Poona	16	26·45	..	..	..	..	18·87
Satara	22	38·16	..	·14	2·93	..	29·18
Sholapur ..	8	35·09	..	·06	..	..	21·59
Belgaum ..	..	40·19	..	·04	·69	..	26·01
Dharwar ..	47	39·97	..	·01	5·11	..	31·95
Bijapur	22	42·74	..	·10	·61	..	28·69

District	Number of Village Panchayats and Sanitary Committees	Ratio of births per 1,000 of population	Ratio of deaths per 1,000 of population				
			Cholera	Small-pox	Plague	Influenza	All causes
Kolaba	24	38·36	..	·14	·93	..	26·84
Ratnagiri ..	5	22·88	..	·33	..	..	24·91
Karachi	42	35·01	..	·12	..	..	29·82
Hyderabad ..	43	26·05	..	..	..	..	30·21
Larkana	47	31·41	..	·52	..	..	23·30
Thar and Parkar ..	26	33·44	..	·70	..	..	37·29
Nawabshah ..	27	30·65	..	·88	..	..	25·34
Sukkur	17	46·37	..	·24	..	..	28·71
Upper Sind Frontier	12	32·94	..	..	..	..	26·92
Bombay Suburban ..	1	18·53	..	2·23	..	..	28·79

The Assistant Directors of Public Health during their tours inspected the sanitary arrangements of the villages where Committees or Panchayats existed and their recommendations for improvements were forwarded to the Revenue Officers concerned.

Examples of useful work done by Sanitary Committees and Village Panchayats are given below :—

Ghoti B.K. conducted a rat destruction campaign. Adawad and Neri B.K. established Ayurvedic dispensaries. Palaskhede distributed medicine free during the prevalence of cholera. Mehunbre and Karjat constructed latrines. Aundh and Bopodi improved the sanitary condition by repairing roads and providing water-pipes and pits for storing Katchara. Varangaon, Thorgavhan, Maroli, Sanjan, Khopoli and Holnantha paid attention to conservancy. Bhadgaon and Shendurni spent Rs. 29 and Rs. 53 respectively in purchasing disinfectants. Nasirabad, Neri B.K. and Nagardeola cleaned gutters. Karjat and Lohare constructed gutters. Several Village Panchayats and Sanitary Committees spent money on improvements to water-supplies.

SECTION X

General

Public Health Laboratories

68. The Poona and Karachi Public Health Laboratories continued their valuable work throughout the year. Some bacteriological and pathological work was also done at the Municipal Laboratory, Ahmedabad.

Poona Laboratory.—Dr. J. B. Mama, was in charge of the Poona Public Health Laboratory throughout the year. A large amount of analytical work, mostly in connection with water-supply, was carried out during the year. Routine bacteriological examination of samples from the three main supplies of Poona, *viz.*, the Camp, City and Kirkee, was carried on as in past years so as to maintain a check on the efficiency of each stage of the processes of purification. Thus :—

The samples from Poona Water-Works included 265 of raw canal water, 272 settled water, 273 filtered water, 273 chlorinated water.

Close on 317 sampled from taps supplied from the Service Reservoirs were also analysed.

Raw canal water 265 samples and 273 tap samples (chlorinated) were analysed for the Poona city supply.

Samples of water examined from the Pashan Water-Works are : Lake water 71, water from top of filter beds 101, filtered water 100, chlorinated water 260 and tap water 31 ; while from the Holkar's Bridge—river water 42 samples, permanganated water 26 samples, permanganated and alummed water 25 samples, filtered water 146, chlorinated water 146 and tap water 29 were analysed.

One hundred and forty water samples were received from various municipalities, prisons, etc. and 160 were examined for experimental purposes. The total for the year was 3,273 samples examined bacteriologically and 4,742 chemically.

A series of experiments was conducted to determine whether salads were carriers and the effect of potassium permanganate in sterilizing them.

The salads were washed in sterile water and the washings tested bacterilogically with McConkey's medium. The washings gave a positive re-action in as low a dilution as 0·0001.

Steeping the salad in potassium permanganate solution 4 grains per gallon—for even three hours, did not appear to sterilize it as the results were positive in 1 c.c. or 0·1 c.c.

Experiments were also conducted to find the minimum quantity of chlorine, in parts per million, required to sterilize a given water and gave a result of 0 in 100 with McConkey's medium.

The filtered water of the Poona Cantonment Water-Works showed 0 in 100—on 4 occasions out of 7—when chlorine at the rate of 0·02 part per million was added to it.

The canal water, on the other hand, needed 0·3 parts per million of chlorine to give a sterile water.

These results are not yet conclusive and the investigation is to be continued.

Chemical Work.—Poona Cantonment Water-Works included 262 samples of raw water; 123 filtered water; 272 chlorinated water; Kirkee Water-Works 67 raw water; 26 filtered water; 28 chlorinated water; samples from out-stations 134.

Estimation of strength (in chlorine) of bleaching powder 1458; determination of alum dose 279; sewage effluent 278 and foods, drugs and chemicals 19.

In October 1926, the Presidency Agricultural Show was held at the College of Agriculture, Poona, from the 20th to the 31st of the month. The Officer in charge of the Public Health Laboratory served as one of the members of the committees.

As the water-supply was to be obtained from wells on the College Farm, volunteers were given training at the laboratory as well as on the spot in the method of sterilization with bleaching powder and worked under his supervision. During the whole period of the Show, there was a clean bill of health in spite of the thousands of people on the premises.

The laboratory also put up a stall in the Rural Health section where demonstrations were daily given in English and the vernaculars, showing the difference between wholesome and dangerous waters, the effects of a bad water-supply, the process of purification of a suspicious supply. Leaflets on the subject were also distributed to the public. Keen interest was evinced by the farming classes in particular in the demonstrations.

Dr. Mama visited Mahableshwar and Matheran to investigate the prevalence of enteric fever and the necessity for improving the water-supply. He gave demonstrations to lady students from the Training College for Women, Poona; Science teachers of High Schools in the Bombay Preidency; Students from the Byramjee Jijeebhoy Medical School, Poona; Senior Cambridge pupils of the Poona Convent; students from the College of Engineering, Poona, and instructions in laboratory technique were given to Dr. M. D. Pustake, M.B., B.S., Health Officer, Gwalior and Captain R. N. Antia, I.M.S., Assistant Director of Pathology, Bombay.

Karachi Public Health Laboratory.—Dr. F. Barretto, D.P.H., was in charge throughout the year. The daily routine examination, bacteriological and chemical, of the raw and chlorinated water was carried out throughout the year. The raw water was also tested daily for fixing the dose of bleaching powder required for sterilization.

Samples of chlorinated water from various taps in the city were also regularly tested.

During the year 1359 samples were examined bacteriologically and 1621 chemically.

The bacteriological results of the chlorinated water were unsatisfactory on certain days in the year due to rainfall, lactose fermenters being detected in ·1 and ·01 c.c. with increase in the total colony counts.

The year was a notable one for the cyclonic weather in the month of September when there was unprecedented rainfall of 14 inches during 2 days in Karachi owing to which the water-supply became polluted and continued to give bad results for some days. The bad weather was followed by abnormal sickness and high mortality in consequence of which the Director of Public Health visited Karachi and issued a report in which he dealt fully with the question of the water-supply and suggested certain measures as a safeguard for the future. He recommended that the existing method of chlorination should be replaced by installing a chloronome which is a more scientific way of chlorinating a water-supply and that regular use should be made of the Public Health Laboratory for examination of daily samples taken from all parts of the Water-supply System.

It is gratifying to note that the Municipal Authorities in Karachi are now taking greater advantage of the laboratory. All these years the only aid sought from the laboratory was bi-weekly reports of the bacteriological results of chlorinated water. The bleaching powder was added merely by guess-work without any preliminary testing. A more scientific method has now been adopted. The bleaching powder is daily tested against the sample of raw water and the dose required for sterilization of the water-supply is daily telephoned to the Medical Officer of Health. Daily reports are also sent to him of the bacteriological examination, the strength of the bleaching powder, and the dosage. With the closer co-operation that has been established it is hoped that the standard of purity will be maintained in the future. The Municipality has undertaken to instal a chloronome.

Investigations were carried out in connection with the Karachi water-supply for which 2 trips were made to Dumlotte and samples were collected at various stages along the conduit and examined bacteriologically. The results of examination showed that water gradually undergoes deterioration as regards its bacterial content from the source to the Reservoir. The reason for this appears to be due to the fact that the masonry conduit is not water tight.

Dr. Barretto inspected the Chlorination Shed at Sydenham Reservoirs with the Medical Officer of Health and advised certain alteration in the method of addition of the bleach solution.

He attended the Indian Science Congress held at Bombay and read a paper on "Chlorination of the Karachi water-supply."

The Paterson Filtration Plant which has been erected at Sukkur for the purification of the city water-supply which is taken from the Indus has been working since May 1924. Samples of the raw water, alummed or settled, filtered and chlorinated are forwarded weekly to the Laboratory ior bacteriological and chemical examination together with samples of bleaching powder. One hundred and thirty-one samples were analysed bacteriologically and two hundred chemically. Dr. Barretto visited Sukkur in September and inspected the working of the filters. Daily examination of samples in the various stages of purification were carried out for 7 days. Some of the defects in the working of the filters were brought to the notice of the President of the Municipality and the instructions were also given as to the methods of collecting and despatching samples.

In addition to the Karachi and Sukkur water-supplies, samples of water have been regularly examined for the Royal Air Force, Drigh Road, where the water-supply is chlorinated. A large number of samples have also been received from the Sukkur Barrage Works and from the prisons at Shikarpur, Hyderabad and Karachi.

Seventy-two food-stuff samples were examined, the largest number being damaged food-stuffs due to old stock and damaged wheat due to the cyclone. Only seven samples of milk and twenty-nine of ghee were forwarded by the Karachi Municipality, a considerable falling off in the numbers as compared with last year. It is regrettable that Municipal Authorities do not take greater advantage of the facilities offered by the laboratory for safeguarding their food-supplies in view of the fact that adulteration of such articles as milk and ghee is known to be extensively practised in all large cities.

Fifty-nine samples received from the Karachi Civil Hospital, District Prisons of Karachi, Hyderabad and Shikarpur and Government Dispensary, Mirpurkhas, were diagnostically examined.

Dr. Barretto rendered help in connection with the "Health Week" held in Karachi in April 1926 during which several exhibits were displayed and explained to the public, of the laboratory methods employed in the bacteriological examination of the water-supply.

The laboratory is made use of more and more by medical practitioners and others for the examination of blood, etc., as the following details of work performed during the year will show :—

Doses of Auto-vaccine issued ..	294
Blood sugar test	5
Urine examination	45
Throat swabs	4
Blood examination	26
Widals	10
Miscellaneous	40
Total ..	424

BOM BRA OF ROYAL ASIA

69. *Pandharpur.*—The chief day of the Ashadi Fair fell on 21st July 1926. The total number of pilgrims who paid the tax were 165,312 and there were 4,006 exemptions.

The Assistant Director of Public Health, Central Registration District, having ascertained as usual the itineraries, sent out the lists of halting places, with dates, to the Surgeon General and to Collectors and Native State Authorities through whose areas palkhis were to travel. Medical supervision by Dispensary Medical Officers along the routes was thereby secured. The Inspector of Sanitation and Vaccination, Poona District, accompanied the Alandi Palkhi up to the Nira. The Inspector of Sanitation and Vaccination, Satara, N. D., met the Alandi Palkhi at Lonand and the Inspector of Sanitation and Vaccination, Ahmednagar District, met the Trimbak and Jalgaon Palkhis at Ahmednagar. The Assistant Director of Public Health inspected the Dnyanoba and Tukaram Palkhis at their earlier halting places. All the Palkhis were inspected again at Wakhri. One Sub-Assistant Surgeon was sent to meet the Alandi Palkhi at Malsiras and accompany it to Pandharpur.

Arrangements at Kurduwadi.—The arrangements in connection with the provision of sanitary and medical facilities were under the control of the Civil Surgeon, Sholapur. There was only one Sub-Assistant Surgeon provided by the Railway Authorities to inspect the trains.

Arrangements at Wakhri.—Water was taken into the reservoir on the 9th July 1926 and was treated with alum and potash permanganate. A cholera hospital was opened as usual. Trenches were provided for the use of pilgrims.

The usual medical arrangements were ready well before the pilgrims began to arrive in Pandharpur. Five Sub-Assistant Surgeons and 20 Final Year Medical students were engaged. The Infectious Diseases Hospital was in charge of Dr. G. P. Phadke, Municipal Medical Officer. The in-coming and out-going pilgrims were inspected at the railway station and Octroi Nakas. Ambulances for the immediate removal of the sick were provided at various places in the town and at the Nakas. Cases of infectious diseases were isolated with contacts.

Twelve qualified Sanitary Inspectors and the usual extra staff of sweepers, scavengers, etc., were also entertained.

Night-soil and latrines.—Four sets of trench latrines were provided. Twenty-two night-soil carts were in use.

Dustbins were pesterined and all the refuse was collected and immediately burnt in incinerators. Thirteen refuse carts were in use and 25 persons were employed to look to the burning of refuse.

Food-supply.—Food-stuffs for sale were regularly inspected and when found unfit for human consumption, destroyed. A special qualified Sanitary Inspector was in charge of the vegetable and fruit market. Mangoes were very scarce this year.

Water-supply.—Water-supply was sufficient except in the higher parts and Govindpura. The Sanitary Engineer is looking into the additions and improvements to the water-works. All the wells in and around Pandharpur were permanganated. Step-wells were temporarily closed. Six water-suppliers were appointed. The reservoirs were also permanganated daily.

Health of pilgrims.—During the fair one case of small-pox and one of plague were admitted in the Infectious Diseases Hospital. These were imported from Bellur and Digoli (Nizam's Dominions) respectively.

Only three cases of suspected cholera were detected. All were fatal. Two died in Hospital and one outside. All were from Amraoti (Berar).

The health of the pilgrims on the whole was good. Pandharpur did not infect any other place.

At the Kartiki Fair at Pandharpur which is next in importance to the Ashadi, the average attendance was about 91,529. The staff engaged included 3 Sub-Assistant Surgeons, 10 Sanitary Inspectors and 100 bhangis during the fair.

Alandi.—The big day of the Kartiki Fair at Alandi fell on 1st December 1926. The Assistant Director of Public Health visited Alandi before and during the fair and made suggestions and supervised the arrangements. No cholera cases occurred.

The fairs at Shingnapur (33,350 pilgrims) and at Shirala (25,000 pilgrims) were also catered for in respect of sanitary and preventive arrangements under the guidance of the Assistant Director of Public Health. All other smaller fair centres in the Central Registration District were free from any epidemic diseases.

In the Western Registration District, the usual principal fairs at Nasik and Trimbak were the Nivritti in January, the Mahashivratra in February, the Ramnavmi in April and the Kartiki in November 1926.

Besides these, two important festivals were held at Trimbak and Nasik during January 1926. The Nivritti fair commenced at Trimbak on the 7th January 1926, lasted for six days, and attracted about 58,907 pilgrims.

The Mahaparva, a festival which occurs about once in eighteen years, commenced at Nasik on the 12th January, lasted for four days, and about 77,974 pilgrims visited the place during this "Parvani."

The Assistant Director of Public Health inspected the fair areas before, during and after the festivals at all odd hours, and at times without giving previous notice to the Local Sanitary Authorities.

The Trimbak Municipality had laid in a stock of 2 cwts. of bleaching powder, 20 gallons of phenyle, and 1 cwt. of carbolic powder, pesterine, and permanganate of potash. Kerosene emulsion was also prepared. And the disinfectants were used freely.

The chlorinated pipe water was turned on and made available for the pilgrims for the whole day and night for six days from 7th January 1926. The total quantity of water issued during these days was 664,550 gallons.

The " Kushavarta " tank was chlorinated every day in the evening from the 7th January till the end of the fair and emptied and cleaned after Mahaparva fair which followed the Nivritti.

The pilgrims of the Nivritti fair, as usual, while going to Trimbak halted at Nasik on the 8th and 9th January and again on their return from Trimbak on the 12th, 13th, 14th and 15th idem taking advantage of the Parva of Makarsankraman and Solar Eclipse also.

In addition to the Nivritti pilgrims there was a large influx of pilgrims purely for Sankrant and Eclipse Parva. The rush of the pilgrims for this " Parva " began from the 13th January. The pilgrims also halted at Nasik for a day or two after the Parva.

The sanitary measures adopted at all these fairs were—

(1) As regards the water-supply—the storage reservoirs, storage cisterns in the city, and the Indra Kund were regularly sterilized.

(2) The people were prohibited from bathing in the Kunds reserved for drinking purposes, and this was specially done by providing extra guards over the river flow, above Ramkund and upto Naro Shankar's Ghat.

The Laxman Kund and Ram Kund were sterilized with bleaching powder every evening.

(3) As regards conservancy arrangements—prompt removal and safe disposal of all the squattings and rubbish from the river bank, Aruna Nalla and road sides were attended to with the assistance of an extra staff of 20 sweepers.

The conservancy arrangements made at Nasik were excellent and the clean appearance presented by the fair area even when the rush of pilgrims was at its very height is largely due to the Health Officer's personal efforts and the untiring energy with which the staff under him worked. Thanks to his forethought the latrines (both public and private) were conserved in the small hours of the morning and by this arrangement the conservancy staff was left free during the day to attend to the fair area. One noticeable feature which was particularly remarked on by European and Indian visitors who visited the fair area was the clean appearance it presented, and the absence of any smell. Great credit is due to the Nasik Municipality, the Chief Officer and the Health Officer for the satisfactory management of the Mahaparva festival which passed off without any infectious disease breaking out in the town.

His Highness the Maharaja of Mysore visited Nasik and Trimbak and was very pleased with the special arrangements made by the Nasik Municipality for His Highness's bath in the sacred river.

Permanganating of wells and conserving camping grounds along the road between Nasik Road Station and Trimbak was undertaken by the Inspector of Sanitation and Vaccination and the vaccinators with the aid of village authorities and managed very satisfactorily.

Saundatti-Yellamma Fair (January, November and December) in the Belgaum District, Yamnur (March) in the Dharwar District, and

Gokarn (February) in the Kanara District are three important fair centres in the Southern Registration District to which people from all parts of the Presidency are drawn. The total number of pilgrims attending the fairs is 125,000 ; 15,000 ; and 20,000 respectively. All the wells at these pilgrim centres were sterilized during the fairs under the direct supervision of the Inspectors of Sanitation and Vaccination of the districts concerned. A temporary dispensary was also set up at the Yellamma Hill. The long felt want of a full time medical officer at the Yellamma Hill was removed by the appointment of one by the Municipality.

None of these fairs were responsible for any outbreak of epidemic diseases.

The festivals at Vautha in Dholka Taluka and Shukaltirth in Broach Taluka were held on 1st and 18th November 1926 respectively at which 10,000 and 35,000 pilgrims assembled. All the arrangements pertaining to sanitation were satisfactory at both places.

The " Manekthari Punem " Fair was held at Dakore in the 3rd week of October 1926. The precautionary measures adopted by the municipality under the guidance of its Health Officer were satisfactory.

The Lal Shahbaz Fair at Sehwan (Sind) was held from 3rd to 5th March 1926 and was attended by 30,000 pilgrims.

Mr. Sahizwari, President of the Municipality, helped the Inspector of Sanitation and Vaccination in the sanitary work of the town. He promptly carried out the suggestions made by the Assistant Director of Public Health while inspecting the town.

The Assistant Director of Public Health encamped at Sehwan during all the days of the fair.

Sanitary Associations

70. There were 10 Sanitary Associations working in the Presidency. All continued to do useful work as the following examples show.

Karachi Association.—During the year under report 1,059 maternity cases as compared with 894 in 1925 were conducted by the Association Mid-wives and supervised by Lady Health Visitors.

There were 7 mid-wives in charge of different quarters. 3,485 house to house visits were paid by the Lady Health Visitors as against 3,541 in 1925 for supervising maternity cases and giving advice on care and nurture of infants. During their visits they impressed upon the inmates of the houses the great necessity of having labour cases conducted by trained Mid-wives and explained to them the harm by an untrained " Dai."

In the Bherumal Thakurdas Maternity Home a Gynæcological Department was introduced as they had full time services of a qualified Lady Doctor available. Besides this, several of the curetting and forceps cases were conducted outside the Maternity Home. Owing to the increase in number of patients, additional beds in the Labour Wards had to be

provided at times. 361 labour cases were conducted in the Home. 850 cases of Gynæcological operations were performed, 19 complete abortions, 20 incomplete (curetted) abortions, 5 threatened abortions, 15 cases of dilatation, and curettage operations, 2 forceps, 9 abnormal labours, 4 placenta praevia, 15 albuminurias, 2 eclampsias and 26 premature cases were conducted. None of the cases proved fatal and all the patients left the Home after 10 days in good health.

There were 24 cases of premature births out of which 6 left the Home well and 18 died. Out of 18, 11 were still-born and 7 died within 5 days. There were 21 still-births, and no fatal case occurred among the mothers.

The Lady Doctor paid 1,195 visits to patients outside the Home in various quarters in the city and rendered medical aid.

At Hyderabad, the work of training of native "Dais" in maternity was ably carried out under the guidance of Miss Piggot and this activity has now been extended to 7 centres.

During the year under report, 55 Dais were under instruction, 26 appeared for examination, all passed, 192 were under supervision, 326 mid-wifery cases were superintended and 7,366 women attended the lectures.

The Medical Officer of Health, Hyderabad Municipality, reports that both the Red Cross and Health Societies have been helping the municipality by doing very useful work. The former has been contributing to the expenses of the Child Welfare Centre started by the municipality in December 1926 and the latter has been assisting by organizing magic lantern demonstrations in the congested parts of the city and in several other ways.

The Indian Red Cross Society (Larkana Branch) was started in May 1925. The first item of work undertaken was the training of Dais and Miss Piggot supplied the committee with a nurse for 3 months who started classes for Dais in the towns of Larkana and Kambar. The branch has its own magic lantern and health and maternity slides. Occasional lectures are organized with a view to educate the public. The literature on health and child and maternity welfare was published and is being distributed amongst the public.

Mrs. Hamid Ali Maternity Home which was started in November 1925 conducted 213 maternity cases—120 indoor and 93 outdoor.

Mrs. Hamid Ali extended the work in the district and started Maternity Homes in 2 villages and succeeded in inducing Kambar and Ratodero municipalities to start Maternity Homes. She also appointed 3 district nurses in various parts of the district to train the dais.

In the Ishwarbai Maternity Home at Shikarpur, 403 cases were conducted—331 inside the Home and 72 outside—as against 367 in 1925. There were 4 fatal cases.

The Health Association, Shikarpur, delivered ten public lectures. There were six meetings among medical practitioners to consider

associated action and the accuracy in the birth and death registration returns. Two leaflets and one pamphlet were printed and widely circulated. The organiser attended Baby Weeks held at Jacobabad, Larkana, Mehar and Sukkur ; delivered lectures on maternity and child welfare.

The Broach Sanitary Association has a long list of useful work performed during the year to its credit. The Association delivered 32 lectures in the city and 25 in the district with magic lantern and illustrated charts on care of teeth, malaria, small-pox and child welfare. A Health Show was also held at the Shukaltirth fair. It distributed 10,000 quinine tablets free and 20,000 sold in villages of the district and the city.

Leaflets on consumption, child welfare, malaria, and fly nuisance were freely distributed, the leaflets being 12,500 in number.

Three Baby weighing machines were put at the vaccination centres of which the public took full advantage.

The pure milk supply branch of the Association distributed at 3 centres at cost price 3,408 maunds and 2 seers to the public.

The Surat Sanitary Association delivered eleven lectures on subjects of public health interest, of which nine were accompanied by cinema shows.

About 6,325 people took advantage of these lectures, 25 per cent. being women.

The Association rendered very great help to the local Baby Week Committee and did substantial amount of propaganda work to popularize vaccination when small-pox was prevailing in the city.

The Ahmedabad Sanitary Association organised 52 magic lantern lectures in different parts of the city. In these lectures, slides on maternity and child-welfare, water-borne diseases, cholera, house-fly, tuberculosis, malaria, small-pox and temperance were exhibited.

Belgaum, Dharwar, Poona and other Sanitary Associations worked according to the indications of the local requirements and opportunities.

Health and Baby Week

71. The Health and Baby Week movement made increasing progress in the Presidency, celebrations being held in many important towns.

The Assistant Directors of Public Health helped in the work of organization and gave lectures and demonstrations.

In Karachi, the Baby and Health Week was celebrated under the auspices of the Health Association from 17th to 25th April 1926. The opening ceremony was performed by Mrs. Cadell.

The Baby Week was organised by the Sukkur Municipality from 21st to 24th February 1926. The exhibition was open in the morning only and the lectures and cinema shows in the evening.

In the Gujerat Registration District, Baby Week celebrations were held in two towns namely Ahmedabad and Broach.

The opening ceremony of the Baby Week at Broach was performed by Mr. F. R. Vakharia on 25th April 1926.

A special feature of the exhibition held in Broach was that in order to extend the benefits of the Baby Week to the Pardah ladies of the Bohra community a separate cinema show was held in Bohrwad.

In the Western Registration District, Baby Weeks were held at Bhusawal, Igatpuri, Malegaon, Thana, Kurla, Bandra, Roha, Dhulia, Dahanu and Nagothana. At Igatpuri, Bandra, Malegaon and Dhulia, the Assistant Director of Public Health delivered a lecture on "Public Health and Co-operation."

He also visited the Bombay Baby Week exhibition at the working Men's Institute, Parel, at the request of the Provincial Secretary to inspect and make suggestions regarding the various models and exhibits.

In the Southern Registration District, Baby Weeks were held at Hubli, Bijapur, Navalgund, Nargund, Ron, Hangal, Gadag and Mundargi and they proved a complete success.

The Health and Baby Week was celebrated in Hubli Town under the presidency of the Collector of Dharwar.

The Baby Week was also celebrated in Bijapur Town in June 1926 under the auspices of the Honourable Mr. B. V. Jadhav, Minister of Education, Medical Relief and Health.

The Assistant Director of Public Health though unable to attend personally at these Health Shows on account of his having been in charge of the Vaccine Institute also, co-operated with the local organisers in the inauguration and management of these shows.

The Inspectors of Sanitation and Vaccination were deputed to the Baby Weeks held at Hubli, Ron, Navalgund, Bijapur and Nargund where they delivered lectures on advantages of vaccination and other instructive lectures with the aid of magic lantern and co-operated heartily with the Honorary Secretaries in making these shows successful.

Health of Industrial Workers

72. The Assistant Directors of Public Health continued their inspection of factories (under the Act of 1911) in the course of their tours submitting copies of their reports to the Managers and the Chief Inspector of Factories.

The Assistant Director of Public Health, Sind Registration District, visited seven factories. Of these one was in Larkana District, four in Karachi City and two in Thar and Parkar District. The factories visited represent industries of rice, bone and cotton.

The Rice factory in Larkana District was worked by steam-power. Only male labour was employed. Water-supply and accommodation were satisfactory. No latrine or urinal was provided.

Bone Crushing factories and Hide Press were inspected in Karachi City. These factories carry on the business of crushing bones and pressing

the hides. Water and conservancy arrangements were satisfactory. Female labour is employed.

Engineering work-shops of Karachi Port Trust were clean and neat when inspected. Water-supply was from a masonry tank, is cleansed every week but without any disinfectant. Instructions were given to treat the water with bleaching powder. In this work-shop labour of 567 people is employed including 14 boys certified by the Certifying Surgeon.

One factory of Asiatic Petroleum Company was visited at Karachi. Labour of 35 female workmen was employed. Water-supply and sanitary arrangements were satisfactory.

Two ginning factories were visited in Thar and Parkar District which were not working owing to the dearth of cotton. The water-supply was from wells and was satisfactory.

Managers of both the factories were quite ignorant of Factory Act and had no idea of maintaining registers according to Factory Act.

The Assistant Director of Public Health, Gujerat Registration District, inspected only one factory, *viz.*, the Thasra Rice Mill and Ginning Factory in Kaira District during his annual tour in 1926. Other factories in Kaira district were either not working at the time or were employing less than 20 workers, so they were not inspected. The location of the mill was found suitable and accommodation, light and ventilation, sufficient. No provision was made for latrines.

Two Match factories, one at Borivli and the other at Ambernath in Bombay Suburban District, and one locomotive work-shop at Igatpuri in Nasik District were inspected by the Assistant Director of Public Health, Western Registration District.

The well at the Borivli Match Factory was inspected at the request of the Chief Inspector of Factories.

Inspection of the site showed that, as is not infrequent in this particular locality, the well has been sunk in some salt bearing strata and that accounts for the high proportion of total solids and chlorine.

The analysis report indicates that it is not exposed to any organic contamination. Hence the drinking of this water cannot be injurious to health.

In the case of the Match factory at Ambernath, it was found that drainage arrangements required to be improved, and the latrine accommodation was inadequate. Eight more seats connected with a separate septic tank required to be provided according to specification which should be obtained from the Assistant Engineer, Ambernath Industrial Area.

As regards the Workmen's quarters—the Superintending Engineer, No. II Suburban Division, was advised—

1. To have smoke vents over cooking places.
2. To have separate communal kitchens for the temporary blocks.
3. To provide lofts.

The sanitary arrangements were found to be adequate in the locomotive work-shop at Igatpuri and the health conditions satisfactory.

The Assistant Director of Public Health, Central Registration District, inspected the Paisa Fund Glass Works, Talegaon, and the Sholapur Spinning and Weaving company Mill.

A thorough coat of pestrine to sides and base of water closets, seats and urinals was suggested.

The Assistant Director of Public Health, Southern Registration District, having been appointed also as Director of Vaccine Institute, Belgaum, in addition to his own duties, could do no regular touring during 1926. Consequently he did not inspect large number of factories. It is to be noted that some 8·12 per cent. (excluding Kanara which are all saw mills) are perennial factories and 91·88 per cent. are seasonal ones. The latter are cotton ginning factories and presses which work for a few months in the year from about the month of February or so. Opportunity was however taken to inspect a few that were easily accessible. In all five factories were inspected—(1) Bail Hongal Cotton ginning and pressing company, (2) Kanbargi Math Bros. Cotton ginning factory, (3) Gokak Falls Mills No. II, (4) Campbell Mills, (5) Manik Bag Oil Mill, Limited.

All factories were found to be suitably located. As regards conservancy, general cleanliness of premises, all except the two factories in Gokak, were found to be far from clean. Attention of respective managers was drawn to this state of affairs. In Bail Hongal Cotton and Press factory, latrines provided were found to be in a dilapidated condition. Early action to provide a new latrine was recommended. In Gokak Mills the number of seats of latrines appeared insufficient. An additional latrine with some ten more seats was recommended. In Manik Bag Oil factory in Belgaum, cess-pool attached to the latrine was found to be full and in a very insanitary condition.

Light and ventilation were satisfactory and no over-crowding was noticed in the factories inspected.

In Bail Hongal ginning and pressing factory water was found to be obtained by the workmen from a step-well within the premises. The danger of a step-well was pointed out and it was suggested that arrangements should be made to provide the necessary drinking water at convenient places near the work rooms. In Gokak Mills and Manik Bag Oil Mill, arrangements for water were inadequate.

No welfare work of any kind is done in any except the two Gokak Mills. The management of Gokak Mills deserves credit for the excellent welfare work. A full time medical officer and a dispensary are maintained. Maternity benefits in one form or other are given. School, play-ground, library, shops, etc., are provided.

Rural Health Section

73. The Agricultural Show was opened by His Excellency the Governor of Bombay as President on the 20th October 1926 and it continued

up to 31st October 1926. This was the first Show of its kind held in this Presidency.

It is a patent fact that in this country some diseases which can be easily prevented claim a heavy toll of human lives, and others equally preventable affect the efficiency of the rural population. In order to elucidate what could be done to improve the health conditions prevailing in villages a health section, under the direction of the Asistant Director of Public Health, Central Registration District, was provided at the Agricultural Show.

As no models were available with the department, some were obtained from the Natural History Society, Bombay, the Grant Medical College and the Haffkine Institute, and they were divided into two sections.

The first consisted of a lay-out showing practical means of improving the sanitary conditions in a village which could be adopted at a very small cost; and the second comprised of stalls illustrating the commoner diseases and the methods of prevention.

Three model houses were exhibited showing the same principles but varying in cost to suit the means of different individuals. These models illustrated the various sanitary points relating to ventilation, damp-proof walls and floors, provision of acqua privy, soakage pits, cowsheds, model wells, etc. In one of these a model room for conducting confinement was also provided.

By way of contrast a model of an insanitary hut was also exhibited.

There were 12 stalls provided, explaining the mode of spread and prevention of small-pox, guinea-worm, malaria, consumption, etc.

The Director, Haffkine Institute, very kindly deputed Dr. Chitre for the period of the Show.

An Inspector of Sanitation and Vaccination from the Central Registration District was also detailed to help at the exhibition.

Dr. Gune, Medical Officer of Health, Pandharpur, was present and rendered valuable help.

The Chief of Sawantwadi very kindly undertook to manage the stall dealing with malaria.

The Health Section of the Agricultural Show was an undoubted success and attracted vast crowds of interested spectators.

Great credit is due to Dr. da Gama for making the exhibition a success, and the Department is indebted also to Drs. Chitre, Gune, Khambatta and all the other helpers who rendered such valuable assistance.

Personal Proceedings

74. The activities of the Officers in charge of the Public Health Laboratories are detailed above (paragraph 68).

The Assistant Directors of Public Health visited 646 towns and villages during the year making reports to the local authorities as usual,

Dispensaries, schools, police lines, factories, proposed sites for Government buildings, etc., were inspected ; and courses of lectures in hygiene and public health were delivered to students at the Medical Schools of Poona, Ahmedabad and Hyderabad (Sind).

Dr. Jamshyd Munsiff, was in charge of the Western Registration District throughout the year. Complete surveys of 6 towns and 18 village Panchayats were made. Seven towns, 2 Notified Area Committees and 1 village Panchayat were visited for general advice, and 32 towns and villages for sanitary purposes and 141 towns and villages for vaccination purposes. Inspectors of Sanitation and Vaccination wrote remarks in 10 Village Sanitary Inspection Books.

A Malaria Survey of Dahiwal of Sakri Taluka was undertaken.

The prevalence of guinea-worm was investigated in Chadwal of Sakri Taluka. He gave opinion on 21 reports of analysis of water received from different parts of his division, inspected 4 school-sites, 2 sites for police lines, 3 sites for markets and slaughter-houses, 4 sites for latrines and night-soil depôts and 18 dispensaries. He attended special meetings of municipalities to discuss matters for sanitary improvements and delivered lectures in connection with holding Baby week and on matters relating to public health in several places.

He acted as the Secretary of the Committee appointed to consider the question of the removal of the Acworth Leper Asylum.

He attended the Conference of the All India Medical Research Workers as a representative of the Bombay Public Health Department.

Before commencing his tour, Dr. Munsiff sent copies of his tour programme to all the Local Authorities of the places he was likely to visit, as usual. But during the year under report in sending copies to the Presidents of the District Local Boards of Nasik and Thana Districts he added that should any member of a local body desire to interview him, he would be very glad to see him and discuss public health matters with him. This invitation met with a welcome response, and a good many members of municipalities, local boards and panchayats came to see him and accompanied him during his inspections. But the Taluka Local Board of Yeola went a step further and invited him to a joint meeting of the Yeola Municipality and Taluka Local Board and asked all the councillors to meet him. This was an excellent opportunity for discussing public health problems in general and the sanitary needs of Yeola town and taluka in particular. The discussion they had, must have made some impression since the Municipality asked for the services of an extra vaccinator and undertook a vaccination campaign to cope with small-pox when it broke out in the town, a few weeks later.

Classes for village officials were held by the Inspectors of Sanitation and Vaccination in the Western Registration District during 1926 as in the year previous during the monsoon. One hundred and forty-eight classes were held by the Inspectors and out of 9,019 village officials, 6,334 took the benefit of the classes in question. Members and subordinates

of talukas local boards as well as panchayatdars were invited to attend these classes and they attended them in fairly large numbers.

Dr. A. daGama, D.P.H., was in charge of the Central Registration District throughout the year except for a short absence on leave from 19th May to 2nd June 1926 when Dr. J. B. Mama acted for him in addition to his own duties. He visited 24 towns and villages for vaccination purposes, made complete sanitary surveys of 5 towns and 6 villages and made remarks in 4 Village Sanitation Books while the Inspectors of Sanitation and Vaccination in 15. He inspected 4 sites for schools, 2 sites for burial grounds. He visited the Sholapur Spinning and Weaving Company Mill and the Paisa Fund Glass Works at Talegaon and the Mission House at Kedgaon. He visited Vadgaon in Haveli Taluka with the Collector and Consulting Surveyor in connection with the proposal for shifting the village site. He investigated the causes of the incidence of malaria at Khandala and also inspected two rain-gauges. He attended the fairs at Pandharpur, Jejuri, Shirala and Alandi and inspected the *palkhis* at Poona, Alandi, Akurdi and Wakhri.

The Lady Wilson Village Baby Scheme movement made good progress during the year. Up to 31st March 1927, 113 dais from 64 villages were brought to Poona, out of whom 108 were trained and 5 returned half trained on account of domestic difficulties.

Two hundred and eighty-nine sets of out-fit have been distributed free through Taluka Sub-Committees, to villages with a population of over 500 ; 40 sets have been sold.

It has been advanced that a fortnight's training is not enough. The object of the scheme, however, is to give elementary training to a dai and not to make her a qualified mid-wife. Hence even a fortnight's training is better than no training at all, and under proper supervision of their after-work, this scheme is bound to do a lot of good.

Its progress must necessarily be very slow. No startling results should be expected.

The scheme has been started in the Sholapur District on the same lines as in Poona. A District Committee has been formed. The District Local Board have sanctioned Rs. 1,400. The Pandharpur Municipality has given a donation of Rs. 500, and the Barsi Municipality, Rs. 200. It is expected that other municipalities will follow suit.

It is proposed to train the school mistresses in the Poona District. By training them it is hoped to get local supervision and also through them arouse interest in the future generation.

It is hoped to extend the scope of the scheme all over the Presidency, Government having agreed to contribute an amount equal to one-third of the actual expenditure up to a maximum of Rs. 10,000 for 1927-28.

Dr. J. L. Pinto, D.P.H., was in charge of the Southern Registration District throughout the year besides holding the additional charge of the Vaccine Institute, Belgaum, from the 3rd February to 31st December 1926.

Advice was rendered on public health matters in the case of 16 towns, 23 were visited for general sanitary purposes and 79 villages for vaccination. He entered remarks in three Inspection Books while Inspectors of Sanitation and Vaccination wrote remarks in 113.

He inspected five sites for schools, 11 sites for burial grounds, two for slaughter-houses, one for beef market and one for tannery. He gave opinion on six reports of analysis of water.

He visited the dispensary at Chandgad and conferred with the Dispensary Officer as to the extensive prevalence of Round-worm amongst the children and bowel diseases which formed the bulk of the out-patients. It was found that the probable cause of the high incidence of these diseases was contamination of the soil by indiscriminate use of places for obeying calls of nature, want of surface cleaning and consequent contamination of sources of drinking water supply. Establishment of a Sanitary Committee or Village Panchayat was recommended.

He visited Kabbur in Chikodi Taluka in connection with removal of pottery and lime kilns to the open site to the north of the village, but the proposed site was found unsuitable as it was too near the inhabited area.

He also inspected five factories and made suggestions as to their improvements.

Dr. K. A. Gandhi, D.P.H., held charge of the Gujerat Registration District throughout the year except from 15th October to 19th November 1926 (during his deputation to the malaria class at Shaharanpur) when Major W. C. Spackman, I.M.S., Civil Surgeon, Ahmedabad, acted for him in addition to his own duties.

Advice was rendered on public health matters in the case of nine towns, 31 were visited for general sanitary purposes and 124 villages for vaccination. He wrote remarks in 34 Village Inspection Books while the Inspecors of Sanitation and Vaccination wrote in 85.

He inspected 10 dispensaries, 11 rain-gauges, 17 sites for schools, two sites for burial grounds, three sites for village extension and gave opinion on 18 water analysis reports.

He attended the "Rath Jatra" fair at Dakore; the quarterly jail meeting at Sabarmati; the Baby Week celebration at Ahmedabad and delivered a lecture on "Public Health".

In 18 villages recommendations were made to the Local Authorities concerned and remarks were made in the Sanitary Inspection Books urging the necessity for assigning separate plots for the storage of manure or the removal of the same from the surroundings of sources of drinking water-supply. The response to these recommendations was in general satisfactory except in some cases where difficulties were put forward to get suitable sites in the neighbourhood.

In each village visited, the Birth and Death registers were scrutinized checked and remarks entered in the Epidemic Registers of Small-pox Plague, Cholera and Influenza.

Vaccination Registers, where available, were also inspected and signed.

Attention of the Sub-divisional officers was drawn when any of the registers were not forthcoming for inspection.

At the request of the Principal of the Gujerat College, Ahmedabad, the Assistant Director of Public Health inspected the latrine and urinal accommodation of the college and its hostel. It was found inadequate and it was also noticed that night-urinals were not provided for the hostel. The latrines also left room for improvement as to their structure and state of repairs. All this was pointed out to the Principal and it was further stated that as the system was one of removal by hand, constant and vigilant supervision was indispensable, if nuisance was to be removed.

A proposed site for a general hospital with Maternity Wards at Ahmedabad was inspected in company with the members of Standing Committee of the Municipality, the Civil Surgeon, Ahmedabad, and the Surgeon General with the Government of Bombay.

Dr. R. V. Shiveshwarkar, D.P.H., was in charge of the Sind Registration District throughout the year. He inspected the sanitary conditions of 26 towns and villages (in Larkana, Thar and Parkar and Karachi Districts) and 6 towns and 21 villages for other sanitary purposes and 182 villages for vaccination.

He inspected 14 schools, 7 dispensaries, 7 factories, 2 rain-gauges and 10 police lines and gave opinion on 48 water analysis reports.

He visited Shikarpur to assist in the investigation of the cause of high infant and maternal mortality in company with Dr. Miss Balfour of the Indian Research Fund Association.

He inspected sites for the bungalows of Agriculture Farms at the instance of the Secretary, General Department.

He visited the Central Jail, Hyderabad, Sind Convict Gang, Hyderabad; and Karachi Prison in connection with the outbreak of scurvy in Hyderabad Jails at the instance of the Inspector General of Prisons.

He visited the Water-works at Sukkur and at Hyderabad and made suggestions as to their improvements.

He attended the 'Lal Shahbaz' fair at Sehwan and supervised the sanitary arrangements personally.

He worked as Honorary Secretary, Sind Committee Bombay Presidency Leprosy Appeal Fund during the year under report.

The Inspectors of Sanitation and Vaccination inspected 102 villages. Out of 4,121 school children examined by the Inspectors, 671 were found with enlarged spleen.

The services of Inspectors of Sanitation and Vaccination were utilized for free distribution of quinine in malarious tracts.

Lists of omissions in Birth and Death registers for 1,230 births not recorded by the Tapedars were received from the vaccinators. These

lists were forwarded to the Collectors for necessary action. The Tapedars at fault were warned and the entries were ordered to be made in the Birth and Death registers.

The office of the Director of Public Health for the Government of Bombay was held by Lieut.-Colonel W. O'S. Murphy, I.M.S., up to 11th February 1926 when Lieut.-Colonel H. M. H. Melhuish, D.S.O., I.M.S., took over charge and acted for him for the remaining part of the year. Twenty-eight towns and villages were visited in connection with water-supply, drainage and general sanitation. Lieut.-Colonel Melhuish investigated the causes of high mortality in Karachi following the cyclone in the month of November 1926.

He inspected the arrangements made for the fairs at Alandi, Jejuri and Devargudda.

He was a member of the Executive Committee organized for the Baby Week, Bombay Presidency, Bombay, and attended their meetings in Bombay. He was also one of the joint Secretaries and Treasurers of the Bombay Leprosy Appeal Fund Committee. He served as a member of the Committee appointed to consider the question of the removal of the Acworth Leper Asylum, Matunga. He gave evidence before the Royal Commission on Agriculture regarding the inter-relationship of the public health of the rural population and the prevailing economic conditions.

He visited the Water-Works at Sukkur, Karachi and Hubli and made suggestions as to their improvements.

He was an *ex-officio* member of the Malaria Advisory Committee Bombay City and attended its meetings.

JAMSHYD MUNSIFF,
M.R.C.P. F.R.C.S. D.P.H., (Edin.),
Officiating Director of Public Health.

Poona, 25th August 1927.

APPENDIX I (*a*)

ANNUAL REPORT OF THE HEALTH OFFICER OF THE PORT OF BOMBAY FOR THE YEAR ENDING 31ST DECEMBER 1926

I.—Summary

The following summary shows the inspection and disinfection work done in the Port of Bombay in connection with out-going and in-coming vessels as well as those lying in the harbour and docks during the year ending 31st December 1926.

Six hundred and eighty-three vessels of all classes with 145,520 crew and passengers were examined during the year.

The clothing and bedding and other articles of 62,929 members of crews and passengers of out-going and in-coming vessels and of members of crews of vessels lying in the port were disinfected. Of these 47,875 were Asiatic and African members of crews, third class or deck European and Indian passengers, 14,501 were pilgrims who left the Port of Bombay for ports out of India, 553 were members of crews and passengers who arrived by vessels on which cases of infectious diseases had occurred during the voyage or while in the port. In addition to the above-mentioned numbers, 2,017 baggage coolies and some stevedores men were disinfected in order to enable certain vessels to work cargo for a few hours after medical inspection and disinfection of their crews and passengers.

II.—Out-going vessels

2. In accordance with Government Notification, General Department, No. 1713, dated the 15th March 1917, the medical examination of all vessels, crews and passengers, proceeding to ports out of India and the disinfection of the clothing and bedding of all Asiatic and African members of crews, of all passengers travelling third class who were not provided with cabin accommodation, of fourth class and deck passengers and of all Asiatic and African servants who sailed on such vessels, were carried out before they left the Port of Bombay.

3. Five hundred and sixty-two outward bound vessels with 63,813 crew and 56,180 passengers, or a total of 119,993 persons exclusive of troops, who were examined by the Military Embarkation Staff, were inspected as against 631 vessels with 63,620 crew and 45,170 passengers or a total of 108,790 persons, during the preceding year.

4. The bedding, boxes and suspected articles of clothing, etc., of 31,302 Asiatic and African members of crews, of 16,573 third class, fourth class and deck passengers and of 14,501 pilgrims who sailed on steamers bound for ports out of India, were disinfected.

5. Four vessels had cases of measles, chicken-pox, influenza and mumps among their crews and passengers within 12 days prior to their departure from this port. The Bills of Health granted to these vessels mentioned the diseases which had occurred on board as well as the measures which had been taken before their departure for the prevention of the spread of infection on board or its introduction at other ports.

III.—Infectious diseases on vessels arriving and departing and in the harbour and docks

6. In accordance with the rules prescribed under Government Notification No. 1713, dated the 15th March 1917, medical inspection and disinfection of vessels which were actually infected or suspected of being infected were carried out. All Pilgrim Ships and all vessels which arrived from East African Ports between the limits of Durban and Port Sudan were also inspected on arrival.

7. One hundred and twelve incoming vessels of various kinds, with crews aggregating 9,157 persons and 16,188 passengers and pilgrims, were inspected during the year. Of these 112 vessels, 12 (including Hired Transports) were found to have had cases of infectious diseases on board at the time of arrival or during the voyage. In connection with these vessels there were 1 case of small-pox, 37 of measles, 6 of chicken-pox, 3 of influenza, 2 of pneumonia, 1 of mumps and 2 of leprosy. The cases which occurred on Hired Transports were dealt with by the Military Authorities on landing in Bombay, and those among the crews and passengers of other vessels by the Port Health Officer. The cases enumerated above, as having occurred among the troops were removed to the Military Hospitals on shore for treatment, while those detected among the European crews were removed to the St. George's Hospital and those among the Asiatic and African members of crews to the Jamsetjee Jeejeebhoy, Goculdas Tejpal, Arthur Road, and Maratha Hospitals. The ships and the clothing and bedding of their crews were disinfected.

8. Five cases of small-pox and three cases of cerebro-spinal fever were reported to have occurred on vessels after their departure from this port. Two cases of small-pox were reported to have been landed at Aden and three cases of small-pox and three of cerebro-spinal fever at Kamaran.

9. Tabular Statement No. 1 gives the number of cases of infectious diseases which occurred on vessels arriving at or departing from the Port of Bombay or lying in the harbour or docks.

10. Tabular Statement No. 2 gives separately the details of infectious diseases on vessels in the harbour and docks. The clothing and bedding of the crews of those vessels aggregating 182 persons were disinfected.

The three cases of influenza referred to in the Statement occurred on H. T. "Neuralia" which arrived in Bombay with troops on 26th February 1926. The necessary precautionary measures were taken.

IV.—Disinfection and Fumigation of Ships

11. During the year under report 49 vessels of all classes were disinfected or fumigated.

12. Of the 49 vessels referred to in the foregoing paragraph, 23 vessels were fumigated by means of the Clayton process. Of this number, 19 were outward-bound pilgrim vessels, proceeding to Jeddah, and 4 were fumigated at the request of the owners. One of these 4 vessels was fumigated for the purpose of destroying cockroaches in the Mess Deck and Fore-hold only. It was a partial fumigation and the result was eminently satisfactory. Another was done on account of the discovery of a plague infected rat during trapping operations. No case of human plague occurred on board. In addition to these vessels, the British India Steam Navigation Company fumigated 17 steamers by their own apparatus and by the Port Clayton Apparatus which was occasionally lent to them at their request for the purpose.

13. The Port Disinfection Station received every Monday clothing and bedding from various hospitals for disinfection. One thousand and seventy-two bundles containing clothing and bedding of this kind were disinfected, as against 958 bundles during the preceding year. The clothing of 2,017 baggage coolies to work cargo on outward bound vessels after the disinfection of their crews and or after obtaining Bills of Health, was disinfected at the request of the Commanders and Agents of the vessels.

V.—General health of shipping

14. During the year under report 1,187 persons connected with the shipping were admitted into the various hospitals in the city. St. George's Hospital admitted 286 European patients of whom 5 died, 274 were discharged cured. The Jamsetjee Jeejeebhoy Hospital admitted 260 Asiatic patients of whom 43 died, and 188 were discharged cured. The Goculdas Tejpal Hospital admitted 616 Asiatics of whom 17 died, 525 were discharged cured and the Arthur Road and Maratha Hospitals admitted 25 patients of whom 2 died, and 23 were discharged cured.

15. Three persons died of mephitic gas poisoning while cleansing bilges of ships during the year. There were 508 accidents on board of vessels which were lying in the harbour and docks. Of these 22 proved fatal.

VI.—Red Sea Pilgrim Traffic

A.—Outward Pilgrim Traffic

16. In accordance with the orders of the Government of India in force, the Outward Pilgrim Traffic of the year under report began on the 26th January 1926. Before the pilgrims embarked at Bombay the ships were thoroughly cleansed and freed from rats by means of the Clayton process.

The pilgrims were medically inspected and their clothing and bedding disinfected before they were allowed to embark.

17. The names of ships, the numbers of pilgrims carried by them and the dates on which they left Bombay for Jeddah are given below :—

No.	Name of Vessel	Number of Pilgrims sailed	Date of Departure 1926
1	S. S. "Alavi"	355	26th January.
2	S. S. "Sarvistan"	521	25th February.
3	S. S. "Jehangir"	1,011	15th March.
4	S. S. "Sultania"	284	31st "
5	S. S. "Alavi"	873	5th April.
6	S. S. "Zayani"	704	19th "
7	S. S. "Gorgistan"	205	" "
8	S. S. "Khosrou"	703	22nd "
9	S. S. "Armanestan"	660	27th "
10	S. S. "Dara"	1,427	30th "
11	S. S. "Sultania"	919	" "
12	S. S. "Jehangir"	804	5th May.
13	S. S. "Alavi"	1,171	10th "
14	S. S. "Akbar"	1,511	13th "
15	S. S. "Gorgistan"	531	17th "
16	S. S. "Zayani"	974	20th "
17	S. S. "Sultania"	571	26th "
18	S. S. "Khosrou"	565	" "
19	S. S. "Armanestan"	712	27th "
	Total ..	14,501	

18. The classification of pilgrims as far as it is available is as follows :—

263	Bombay Presidency (including Sind).	890	Native States.
154	Bombay City.	236	Malay States (British).
186	Madras Presidency.		
5,777	Bengal Presidency.	156	Russian Turkistan.
1,491	Assam Province.	967	Chinese Turkistan.
844	Bihar and Orissa.	248	Afghanistan.
879	Punjab and North-West Frontier.	38	Bokhara.
		345	Arabia.
1,648	United Provinces of Agra and Oudh.	22	Dutch East Indies.
		1	Syria.
120	Central Provinces and Berar.	7	Mesopotamia.
		52	Persian Gulf.
15	Ajmere-Merwara.	4	China.
15	Baluchistan.	1	Egypt.
58	Burmah.	1	Portuguese East Africa.
11,450		2,968	

Total.. 14,418

19. The difference in the total number of souls embarked and passports issued is due to 83 being babies in arms to whom separate passports were not issued.

20. Twelve thousand eight hundred and seventy-one intending pilgrims were vaccinated before starting, by a special vaccinating staff placed at the disposal of the Police Commissioner by the Municipality.

21. Thirty-three deaths occurred at sea among pilgrims on out-going ships. They were chiefly due to senile debility, phthisis, pneumonia, convulsions, cerebro-spinal meningitis, chronic bronchitis, malaria, tuberculosis, cardiac failure, and heat stroke.

22. The Quarantine Camp at Kamaran was kept fully staffed. The pilgrimage opened at that port with the arrival of s.s. *Alavi* from Bombay on 7th February 1926 and closed with the departure from that port of the s.s. *Armanestan* on the 9th June 1926.

23. There were three cases of small-pox on two vessels which sailed from Bombay. They were landed at Kamaran. Three cases of cerebro-spinal meningitis were reported to have been removed at Kamaran from one of the vessels. The Medical Officers concerned failed to bring them to the notice of the Director, Kamaran Lazaretto. It was, therefore, recommended that no more licenses to hold charge of Pilgrim Ships should be granted to them in future.

B.—Inward Pilgrim Traffic

24. During the year under report 9,280 pilgrims arrived from Jeddah in 13 vessels as tabulated in statement No. 3 which is appended to this report.

25. One hundred and nine deaths occurred among the pilgrims during the return voyage. They were due to cardiac failure, general debility, senile debility, dysentery, tuberculosis, heat-stroke, pneumonia, fracture of skull due to fall, diarrhœa, starvation, chronic bronchitis, hyperpyreia and gastro enteritis.

VII.—Sanitary state of the harbour and the foreshore

26. The sanitary state of the harbour and the various Bunders and Docks was fair.

VIII.—Cholera, Small-pox, Plague, Acute Pneumonia and Influenza in the City of Bombay

27. During the year under report 5 deaths from cholera, 480 deaths from small-pox, 56 deaths from plague, 8,584 deaths from acute pneumonia, and 90 deaths from influenza occurred in the City of Bombay during the year 1926 as against 12 deaths from cholera, 570 deaths from small-pox, 174 deaths from plague, 8,490 deaths from acute pneumonia and 94 deaths from influenza, during the preceding year.

28. The Port Health Officer, Mombasa, reports that a fairly severe epidemic of small-pox occurred in 1926 in Mombasa and that he feels satisfied that the epidemic was started by a child who developed signs of small-pox on the day after landing from Bombay. The case was concealed in the Mombasa Bazar area and was only discovered after many other cases had occurred. He states that it would be of considerable value to Mombasa and Kenya, were it possible to ensure that all persons embarking at Bombay for Mombasa have been recently vaccinated. It is not, however, within the Port Health Officer's power to insist on vaccination of either crew or passengers.

IX.—General

29. The undersigned was in charge of the Port Health Department from the beginning of the year under report to 31st March 1926 when he went on leave to England, and again from 17th November to the end of the year. Lieut.-Colonel T. C. McCombie Young, I.M.S., acted as Port Health Officer during his absence on leave.

30. The members of the Medical, Clerical, and Sanitary Staffs performed their duties satisfactorily.

W. M. HOUSTON,
M.B., D.P.H.,
Lieut.-Colonel, I.M.S.,
Health Officer of the Port.

Bombay Port Health Office :
New Custom House,
Dated 31st March 1927.

TABLE No. 1

Statement showing the summary of the Shipping of the Bombay Port and work done in connection therewith for the year ending 31st December 1926

Vessels including country craft	No. of Vessels inspected	No. of persons inspected	No. of Asiatic and African Crew and 3rd Class or Deck passengers disinfected	No. of vessels		No. of persons vaccinated for small-pox and inoculated for Cholera	
				Disinfected	Fumigated	Vaccinated	Inoculated
Entered	112	25,345	371	12	..	..	..
Left	562	1,19,993	62,376	*5	19	12,871	..
In Harbour during the year ..	9	182	182	9	4	31	..
Total ..	683	1,45,520	62,929	26	23	12,902	..
Total for 1925 ..	760	1,41,950	54,045	39	5	2,039	..

Vessels including country craft	Disease and Cases of each										
	Plague	Cholera	Small-pox	Measles	Chicken-pox	Jigger	Influenza	Acute Pneumonia	Leprosy	Mumps	Cerebro-Spinal Fever
Entered	..	..	1	37	6	..	3	2	4 2	1	..
Left	..	..	5	..	..	..	..	..	..	..	3
In Harbour during the year ..	..	..	6	4	2	..	..	..	† 1	9	..
Total ..	..	..	12	41	8	..	3	2	3	10	3
Total for 1925 ..	..	..	15	35	17	1	13	1	..	1	..

*Two disinfected at Aden and three at Kamaran.
†Indians

TABLE No. 2

Statement showing the number of steamships, square-rigged vessels and Indian crafts which became infected while lying in the Port of Bombay

Months	No. of persons who were infected with infectious disease in Docks and Bunders			Total No. of infected vessels	Total number of infectious diseases in the Bombay Harbour								No. of Crew disinfected
	Plague	Cholera	Influenza		Plague	Cholera	Small-pox	Measles	Chicken-pox	Scarletina	Mumps	Leprosy	
January ..	..	..	..	..	..	..	..	..	..	..	..	..	..
February ..	..	..	..	..	..	..	..	..	..	..	..	..	..
March ..	..	..	..	2	..	..	1	3	..	..	..	..	..
April ..	..	..	..	2	..	..	4	..	1	..	5	..	99
May ..	..	..	..	3	..	..	..	1	..	..	4	1	..
June ..	..	..	..	1	..	..	1	..	..	..	..	..	..
July ..	..	..	..	..	..	..	..	..	..	..	..	..	..
August ..	..	..	..	..	..	..	..	..	..	..	..	..	..
September ..	..	..	..	..	..	..	..	..	..	..	..	..	..
October ..	..	..	..	..	..	..	..	..	..	..	..	..	..
November ..	..	..	..	1	..	..	..	..	1	..	..	..	83
December ..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total ..	..	..	..	9	..	..	6	4	2	..	9	1	182
Total for 1925 ..	..	..	13	12	..	..	6	..	5	..	..	..	405

TABLE NO. 3

Statement showing the number of pilgrims who arrived in Bombay from Jeddah by vessels during the year 1926

No.	Name of ship	Date of arrival 1926	Number of crew inspected	Number of Pilgrims inspected	Number of deaths during the voyage	Number of cases of infectious diseases on Board		Remarks
						On arrival	During Voyage	
1	S. S. "Shuja" ..	9th July ..	90	1,413	9	..	..	..
2	S. S. "Sarvistan"	11th July ..	105	1,557	23	..	..	..
3	S. S. "Arman e stan".	14th July ..	100	1,184	14	..	..	..
4	S. S. Zayani" ..	15th July ..	92	297	10	..	..	..
5	S. S. "Dara" ..	16th July ..	97	1,415	16	..	..	..
6	S. S. "Shuja" ..	12th August ..	93	826	7	..	..	..
7	S. S. "Khosrou"	14th August ..	94	573	13	..	..	..
8	S. S. "Sarvistan"	16th August ..	110	607	2	..	..	..
9	S. S. "Akbar" ..	21st August ..	92	345	5	..	..	..
10	S. S. "Sultania"	23rd August ..	90	210	1	..	..	..
11	S. S. "Alavi" ..	29th August ..	94	282	..	..	..	..
12	S. S. "Jehangir"	17th September ..	98	308	9	..	..	..
13	S. S. "Alavi" ..	22nd November ..	86	263	..	..	..	..
		Total ..	1,247	9,280	109	..	..	..

APPENDIX I(*b*)

ANNUAL REPORT OF THE HEALTH OFFICER OF THE PORT, KARCHI, FOR THE YEAR ENDING 31ST DECEMBER 1926

I.—Outgoing Vessels

366 steamers outward bound for ports beyond India were medically inspected and given Bills of Health during the year under report.

Of this number 188 steamers were proceeding to Aden, the Red Sea and Europe, and 178 to other Ports out of India including the Persian Gulf.

In addition to these, 14 pilgrim ships from Jeddah bound for Bombay made a passing call at Karachi to land pilgrims booked for this Port. The Bills of Health of these ships were endorsed and pratiques were granted to them after medical inspection of their passengers and crews.

289 country crafts sailing for Ports beyond India were also granted Bills of Health after medical inspection.

In accordance with the Port Health Regulations in force, the Asiatic and African crews, deck and third class passengers of all steamers and country crafts proceeding to Ports out of India were medically inspected and their clothing, bedding, and other articles disinfected at the Port Health Disinfecting Station, Kiamari, prior to their departure from the Port of Karachi.

II.—Incoming Vessels

During the year under report 49 steamers arrived in the Harbour in quarantine, these ships were medically inspected on their arrival and pratiques were granted to them.

Of these 49 steamers, 24 arrived from East African Ports, 14 from Jeddah via Aden, and the remaining 11 from various other Ports.

Eight country crafts arrived here in quarantine from East African Ports they were also medically inspected on their arrival and pratiques were granted to them.

III.—Synopsis of Inspection and Disinfection performed during the year under report

The following tabular statement shows the number of vessels, crews and passengers inspected :—

	Vessels			Crews and Passengers		
	Steamers	Country boats	Total	Of steamers	Of country boats	Total
Incoming ..	49	8	57	19,344	133	19,477
Outgoing ..	366	289	655	65,967	3,694	69,661
					Total ..	89,138

Of these 89,138 persons (crews and passengers) who were medically inspected on their arrival at, or departure from, the Port of Karachi 49,569 persons (crews and passengers) also had their clothing, bedding and other articles disinfected.

IV.—Miscellaneous Disinfection

On several occasions during the year clothing, bedding, etc., which was sent for disinfection from the Military Department, Manora, Customs Department, Karachi, and Private Individuals, were duly disinfected by steam in the " Equifex Steam Disinfectors ".

V.—Plague

No cases of this disease occurred on incoming or outgoing vessels during the year under report.

VI.—Cholera

No cases of this disease occurred during the year under report on either incoming or outgoing vessels.

VII.—Small-pox

During the year under report one case of small-pox was removed to the Epidemic Diseases Hospital, Karachi, for treatment, from the s.s. " Varela." The necessary precautionary measures, *i.e.*, disinfection of crew and passengers, etc., were duly carried out and those who were willing were vaccinated. Telegram was despatched to the Port Health Officer, Bombay, for information as the ship arrived from Busrah on 11th February 1926 and continued her voyage to Bombay on the same day.

VIII.—Chicken-Pox

Four cases of chicken-pox were removed from three incoming vessels to the Epidemic Diseases Hospital, Karachi, *viz.*, one saloon boy from s.s. " City of Paris " on 29th March 1926, one Assistant Engineer from the s.s. " Lauterfels " on 7th June 1926 and two Engine room crew from the s.s. " Varsova " on 20th June 1926. The necessary precautionary measures, *viz.*, disinfection of the bedding, clothing, etc., of the crew and passengers was duly carried out at the Port Health Disinfecting Station and the infected parts of the ships were disinfected in each case.

In the case of s. s. " City of Paris " a telegram notifying the case was sent to the Port Health Officer, Bombay, as the ship sailed hence for United Kingdom *via* Bombay on the day on which the case of chicken-pox was removed.

At the medical inspection and disinfection of the crew and deck passengers of the s.s. " Barala " on 15th March 1926, at the Port Health Disinfecting Station, one male child (deck passengers) was found to be

suffering from chicken-pox and was therefore not allowed to sail. The parents of this little patient, being the immediate contacts were also not allowed to sail.

Telegraphic information was received from the Port Health Officer, Bombay, on 17th April 1926, that two cases of chicken-pox amongst the crew of s.s. " City of Edinburgh " were landed at Bombay. On arrival of the steamer at Karachi, the crew and passengers were medically inspected and found to be free from all infectious diseases. No further case of chicken-pox occurred on board the steamer during her stay in the Port of Karachi.

IX.—Measles

Two cases of measles were detected during the year amongst the passengers at the time of medical inspection and disinfection at the Port Health Disinfecting Station. The usual precautionary measures (removal of the patients to hospital, disinfection, etc.), were carried out.

X.—Parotitis (Mumps), Yellow Fever, Jigger, Sleeping-Sickness, Scarlet Fever, Acute-Pneumonia, Cerebro-Spinal Meningitis and Influenza

No cases of these diseases were detected during the year.

XI.—Non-Notifiable Diseases

During the year under report one case of non-notifiable disease amongst the crew of the I. G. T. S. "Patrick Stewart" was sent to the Civil Hospital, Karachi, for treatment.

XII.—Deaths from Non-Notifiable Diseases

Eight deaths from various diseases were reported as having occurred on board the steamers either in Karachi Harbour or during the voyage to Karachi during the year.

XIII.—Red Sea Pilgrim Traffic

A.—Outward Pilgrim Traffic

The outward Pilgrim Traffic during the year under report began on the 25th January 1926. *Sixteen steamers carrying 8,954 pilgrims (as against 3 steamers and 782 pilgrims during the preceding year) sailed from this Port.*

Immediately before their embarkation the pilgrims were medically inspected, and their clothing, bedding, etc., disinfected, at the Port Health Disinfecting Station, Kiamari.

The names of the steamers, the number of pilgrims carried by them, and the dates on which they sailed from Karachi to Jeddah, are given below in tabular form.

No.	Name of steamers	Number of pilgrims embarked at Karachi	Date of departure
1	S. S. "Alavi"	18	30th January 1926.
2	S. S. "Saristan"	294	1st March 1926.
3	S. S. "Jehangir"	150	18th March 1926.
4	S. S. "Sultania"	1,211	3rd April 1926.
5	S. S. "Alavi"	309	9th April 1926.
6	S. S. "Gorjistan"	712	22nd April 1926.
7	S. S. "Zayani"	269	22nd April 1926.
8	S. S. "Khosrou"	807	26th April 1926.
9	S. S. "Armanestan"	539	30th April 1926.
10	S. S. "Sultania"	604	3rd May 1926.
11	S. S. "Homayun"	888	4th May 1926.
12	S. S. "Jehangir"	361	9th May 1926.
13	S. S. "Gorjistan"	377	20th May 1926.
14	S. S. "Sultania"	965	29th May 1926.
15	S. S. "Armanestan"	493	30th May 1926.
16	S. S. "Khosrou"	957	30th May 1926.
	Total ..	8,954	

Out of the above named 16 steamers, 1 steamer s.s. "Homayun" was thoroughly cleansed and freed from rats by means of the Clayton process at this Port as this steamer started her voyage from Karachi with pilgrims.

The s.s. "Alavi" which arrived at Karachi from Bombay with pilgrims on the 29th January 1926 reported death of one male pilgrim aged 72 years during the voyage from Bombay to Karachi. The cause of the death was certified to be senile debility by the ship's Surgeon.

During the year under report one case of chicken-pox and three cases of small-pox were detected amongst the pilgrims at the time of the medical inspection held at the Port Health Disinfecting Station prior to their embarkation.

On the 4th April 1926 the 4th Engineer of the Pilgrim Ship "Sultania" met with an accident on board during the course of his duty while the ship was in Karachi Harbour and sustained injury to his head resulting in the fracture of the skull. First aid was promptly rendered to him and immediately sent to the Civil Hospital for treatment.

B.—Inward Pilgrim Traffic

The following table shows the number of pilgrims who returned to Karachi from Jeddah, the names of the ships in which they travelled, and other particulars :—

No.	Name of steamers	Date of arrival	No. of crew	Number of pilgrims for Karachi	Number of deaths during voyage or in Karachi Harbour	Number of cases of infectious desease during voyage or on arrival
1	S.S. "Gorjistan" ..	8th July 1926 ..	64	896	6	*Nil.*
2	S.S. "Sultania" ..	9th July 1926 ..	102	1,513	13	*Nil.*
3	S.S. "Khosrou" ..	9th July 1926 ..	96	1,512	9	*Nil.*
4	S.S. "Zayani" ..	11th July 1926 ..	92	674	8	*Nil.*
5	S.S. "Akbar" ..	13th July 1926 ..	93	1,500	11	*Nil.*
6	S.S. "Jehangir" ..	17th July 1926 ..	94	1,148	15	*Nil.*
7	S.S. "Shuja" ..	9th August 1926 ..	93	609	5	*Nil.*
8	S.S. "Khosrou" ..	13th August 1926 .	94	945	13	*Nil.*
9	S.S. "Sarvistan" ..	13th August 1926 .	110	995	2	*Nil.*
10	S.S. "Akbar" ..	18th August 1926 .	92	1,163	5	*Nil.*
11	S.S. "Sultania" ..	20th August 1926 .	96	915	1	*Nil.*
12	S.S. "Gorjistan" ..	25th August 1926 .	80	97	..	*Nil.*
13	S.S. "Alavi" ..	26th August 1926 .	94	233	..	*Nil.*
14	S.S. "Jehangir" ..	14th September 1926.	98	605	8	*Nil.*
		Total ..	1,298	12,805	96	*Nil.*

In all 12,805 pilgrims returned to Karachi during the pilgrim season of 1926 whereas the numbers of pilgrims who returned to Karachi during the previous Haj Season of 1925 was 1,670.

Ninety-six deaths as shown in the tabular form B, occurred on the returning pilgrim ships. Deaths were due mostly to senile debility, inanition, and diarrhœa.

Sixty-five pilgrims were in ship's hospital on arrival at Karachi, *i.e.*, 1 on Gorjistan, 5 on Sultania, 11 on Zayani, 10 on Akbar, 19 on Jehangir, 11 on Shuja, 4 on Khosrou, 3 on Sarvistan and 1 on Alavi suffering from general debility, diarrhœa and inanition.

Out of these sixty-five pilgrims 11 were sent to the Civil Hospital for treatment while the rest declined to go to Hospital.

The Commanders of the s.s." Khosrou " and " Sarvistan " reported on arrival at Karachi from Jeddah on 13th August 1926 that there were 23 stowaways on board the s.s." Khosrou " and 6 on board the s.s. " Sarvistan. " The stowaways were handed over to police by the Commanders of the respective vessels.

XIV.—Clayton Apparatus

One steamer was fumigated during the year under report.

XV.—Sanitary State of the Harbour

The sanitary state of the Harbour was satisfactory.

XVI.—Plague, Cholera, Small-pox, Measles, Chicken-pox, Influenza and Acute-Pneumonia in the City of Karachi

During the year under report there occurred 26 deaths from plague, *nil* from Cholera, 75 from Small-pox, *nil* from Chiken-pox, 316 from Measles, 7 from Influenza and 870 from Acute-Pheumonia in the Port and City of Karachi.

XVII.—Staff

From 1st January 1926 to 11th September 1926 Assistant Surgeon W.W. O'Connor, I.M.D., acted as Assistant Port Health Officer, Karachi and from 12th September 1926 Assistant Surgeon J.E. Howard, L.R.C.P. M.R.C.S., I.M.D., who returned from study leave, resumed charge of his duties as Assistant Port Health Officer.

The medical staff and the members of the steam launch, Disinfecting Station and Clayton Apparatus Establishments worked satisfactorily during the year.

Mr. Mahomed Jaffer Shaikh Ibrahim, the only clerk in this office, carried out his duties with great zeal and energy.

B. F. KHAMBATTA,
M.B.,B.S., D.P.H.,
Health Officer of the Port, Karachi.

Port Health Office, Kiamari,
Karachi, dated 22nd March 1927.

APPENDIX I (*c*)

Annual Report of the Health Officer of the Port of Aden for the Year 1926

I.—General Remarks

One thousand four hundred and eighty-two vessels and rigged vessels were granted Bills of Health during the year against one thousand two hundred and sixty-five for the year 1925.

Of the above number 986 were sailing under the British flag and 496 under foreign flags.

Eight hundred and seventy-six Bills of Health were issued to Dhows against 959 for the year 1925.

The accompanying table " A" gives a list of vessels on board of which Infectious Diseases existed on arrival. In the case of these vessels all, sanitary precautions were taken to prevent the spread of diseases.

The following cases of infectious diseases were landed from the shipping :—

Smal-pox	.. 6	Jigger	.. 2
Chicken-pox	.. 5	Measles	.. 1

II.—Pilgrim Traffic

Ten ships carrying pilgrims passed through the Port of Aden during the year. All were medically examined but they were not granted pratique.

Year.	No. of ships.	No. of pilgrims.	No. of deaths.
1926 ..	10	10,098	.. 11

III.—Table " A "

The following is the list of vessels on board of which cases of infectious diseases existed on arrival at this Port during the year :—

Date	Name of ship	Nationality	From	To	No. of cases	Remarks
9th January 1926 ..	S.S. " Maloja " ..	British ..	London ..	Australia .	2 Mls. ..	Treated O.B.
13th February 1926.	S.S. " Merkara " ..	Do. ..	Do. ..	E. Africa .	1 W.C. ..	Do.
Do. ..	S.S. " Morea " ..	Do. ..	Do. ..	China ..	1 Mls. ..	Do.
17th March 1926 ..	S.S. " City of Durham ".	Do. ..	Calcutta .	London ..	1 C.P. ..	Landed.
22nd March 1926 ..	S.S. " Angkor " ..	French ..	Colombo .	France ..	1 Mls. ..	Treated O.B
6th April 1926 ..	S.S. " City of Edinburgh ".	British ..	New York	Bombay .	1 C P. ..	Do.
4th June 1926 ..	S.S. " Shuja " ..	Do. ..	Jeddah ..	Mokalla ..	2 S.P. ..	Landed.
10th June 1926 ..	S.S. " Explorateur Grandidier ".	French ..	Maurice .	Marseille .	2 J.R. ..	Do.
11th June 1926 ..	S.S. " Shuja " ..	British ..	Sheher ..	Jeddah ..	1 S. P. ..	Do.

Date	Name of ship	National-ity	From	To	No. of cases	Remarks
1st July 1926 ..	S.S." Razmak " ..	British ..	Bombay .	Bombay .	1 Mls. ..	Landed.
2nd July 1926 ..	S.S." Teespool " ..	Do. ..	Do. ..	Dunkirk .	1 S.P. ..	Do.
6th August 1926 ..	S.S." Razmak " ..	Do. ..	Do. ..	Bombay .	1 S.P. ..	Do.
4th November 1926.	S.S." Golconda "..	Do. ..	Delag o a-Bay.	Calcutta .	1 C.P. ..	Do.
7th December 1926 .	S.S." Clan Mc Tavish".	Do. ..	Calicut ..	Ro t t e r-dam.	3 C.P. ..	Do.
17th December 1926	S.S." City of Venice ".	Do. ..	Calcutta .	London ..	1 S. P. ..	Do.

N.B.—S. P. stands for Small-pox, C. P. stands for Chicken-pox, Mls. stands for Measles, J. R. stands for Jigger and W. C. stands for Whooping-Cough.

IV

The following are the names and other information regarding the pilgrim ships which passed through Aden during the year under report :—

Date	Name of ship	National-ity	From	To	Number of		
					Pil-grims	Infectious cases	Deaths
5th February 1926	S.S. " Alavi " ..	British ..	Bombay.	Jeddah ..	367	..	..
16th April 1926 ..	S.S. " Alavi " ..	Do. ..	Do. ..	Do. ..	1,183	..	2
3rd May 1926 ..	S.S. " Khosrou "	Do. ..	Karachi..	Do. ..	1,510	..	..
2nd July 1926 ..	S.S. " Gorgistan"	Do. ..	Jeddah ..	Karachi ..	887	..	..
6th August 1926.	S.S. " Khosrou "	Do. ..	Do. ..	Do. ..	1,503	..	3
11th August 1926.	S.S. " Akbar " ..	Do. ..	Do. ..	Bombay ..	1,512	..	2
Do. ..	S.S. " Sultania "	Do. ..	Do. ..	Do. ..	1,284	..	1
20th August 1926	S. S. " Alavi " ..	Do. ..	Do. ..	Karachi ..	515	..	..
7th September 1926.	S.S. " Jehangir "	Do. ..	Do. ..	Bombay ..	1,074	..	2
13th Nov. 1926 ..	S.S " Alavi " ..	Do. ..	Do. ..	Do. ..	263	..	..

V.—Establishment

Major J. B. Hanafin, C.I.E., F.R.C.S.I., D.P.H., D.T.M. & H. (Camb.), I.M.S., Officiating Health Officer of the Port from 1st January to 28th December 1926 *vice* Major E.S. Phipson, D.S.O., M.D., D.P.H., D.T.M. & H., I.M.S. on one year leave *ex.* India.

Major E. S. Phipson, D.S.O., M.D., M.R.C.P., D.P.H., D.T.M. & H., I.M.S., Health Officer of the Port resumed charge of the Port Health Office from 29th December 1926 forenoon.

VI.—Office Establishment

Mr. E. Naser, Port Health Clerk from 1st January to 31st December 1926.

Peon Omer Bubaker from 1st to 7th April 1926. Granted leave for 2 months and 10 days on average pay from 8th April 1926, F. N. combined with extraordinary leave for 2 months on half average pay.' Hussain Ali was appointed to act for him.

Peon Abdulla Hussain from 1st January to 30th September 1926. Granted leave for 2 months and 16 days on average pay combined with one month and 14 days on half average pay from 1st October 1926. Abdulla Najee was appointed to act for him.

VII.—Launch Establisment

Driver Hussain Noman from 1st January to 31st December 1926. Succani Mohamed Magon from 1st January to 31st December 1926. Stoker Abdo Noman from 1st January to 31st December 1926. Lascar Ali Magon from 1st January to 27th December 1926. Died on the 27th afternoon. His death was due to valvular disease of the heart.

VIII.—Disinfecting Stove

A fireman was retained for the care of the Disinfecting Stove on Flint Island during the year in accordance with Government Order, General Department, No. 4607, dated 18th April 1920.

Cases treated in the Quarantine Hospital, Aden, during the year 1926

1. No cases of Infectious Diseases were treated in the Quarantine Hospital, Aden, during the year.

2. Three Cases of Small-pox, 5 Chicken-pox, 2 Jigger and 1 Measles from the shipping were treated in the Aden Settlement Infectious Diseases Hospital, Maala.

3. One Case of Small-pox from s. s. "Teespool" on the 2nd July 1926 landed for treatment in the British Military Hospital, Aden.

4. Two Cases of Enteric Group, one from H. T. "Derbyshire" on 24th March 1926 and one from H. T. "Assaye" on the 30th October 1926 were treated in the British Military Hospital, Aden.

5. Two Cases Small-pox from Pilgrim Ship "Shuja" were treated in the British Military Hospital, Aden.

E. S. PHIPSON,
M.D. (Lond.), D.P.H.,
Major, I.M.S.,
Health Officer of the Port, Aden.

APPENDIX II

The following table shews year of completion of drainage or water-works and a comparison of mean death-rate in the towns concerned for periods preceding and subsequent to installation.

In column 7 is given for comparison the death-rate of the adjoining rural circle for the year under report :—

District.	Town.	Date of completion of works of		Mean death-rate (a).		Death-rate in adjoining rural circle (a).	Mean death-rate from cholera *plus* dysentery and diarrhœa.		Remarks
		Drainage.	Water supply.	For years preceding the installation.	For the years (succeeding installation) ending 1926.		For years preceding works.	For the years (following the works) ending 1926.	
1	2	3	4	5	6	7	8	9	10
Sholapur	Sholapur	...	1917	61·01	33·29	29·36	14·05	1·96	
Do.	Pandharpur	...	1911	49·08	53·78	24·44	19·60	2·22	
Nasik	Nasik	...	1913	52·73	32·85	27·74	11·33	1·99	
Bijapur	Bijapur	...	1913	30·06	23·30	25·50	1·77	1·64	
Poona	Lonavla	...	1915	13·68	25·31	23·68	1·12	1·45	
Do.	Poona City*	1916	...	36·47	39·18	16·95	10·18	2·44	* Chlorination of water supply began in 1916.
Satara	Karad	...	1916	18·58	12·31	30·80	7·10	0·73	
Sholapur	Barsi	...	1917	44·41	37·69	32·39	5·83	2·02	
Nasik	Trimbak	...	1921	43·88	19·01	27·74	2·35	0·71	
Poona	Poona Cantonment†	...	1916	23·49	13·49	16·95	2·07	1·04	† Change in type of installation.
Sukkur	Sukkur	...	1924	21·48	19·18	23·06	0·48	0·23	

(a) Exclusive of plague and Influenza.

APPENDIX

ANNUAL FORM NO. I.—*Showing the* BIRTHS *registered in the*

1	2	3			4		
Number.	Districts.	POPULATION ACCORDING TO CENSUS OF 1921.			NUMBER OF BIRTHS REGISTERED.		
		Male.	Female.	Total.	Male.	Female.	Total.
	Western Registration District.						
1	East Khándesh	545,376	529,746	1,075,122	25,077	24,208	50,185
2	West Khándesh	309,511	303,201	612,712	15,030	14,556	29,586
3	Násik	418,510	406,706	825,216	18,994	17,828	36,822
4	Thána	388,310	368,589	756,899	13,528	12,534	26,062
5	Bombay Suburban	87,567	63,874	151,441	1,528	1,419	2,942
6	Kolába	279,350	283,122	562,472	11,875	11,346	23,221
7	Bombay City	751,948	396,867	1,148,815	10,611	10,093	20,704
	Central Registration District.						
8	Ahmednagar	362,947	361,031	723,978	18,173	17,448	35,621
9	Poona	500,601	487,080	987,681	17,758	16,311	34,069
10	Sholápur	382,374	359,256	741,630	17,341	16,361	33,702
11	Satára	511,238	514,457	1,025,695	22,180	21,050	43,230
12	Ratnágiri	525,085	628,895	1,153,980	23,897	22,455	46,352
	Southern Registration District.						
13	Belgaum	484,615	465,047	949,662	20,860	20,022	40,882
14	Dhárwár	528,348	507,861	1,036,209	19,707	18,953	38,660
15	Bijápur	405,148	391,208	796,356	17,477	17,073	34,550
16	Kánara	203,950	197,526	401,476	7,070	6,595	13,665
	Gujarát Registration District.						
17	Surat	337,276	336,845	674,121	14,244	13,455	27,699
18	Broach	158,568	149,143	307,711	7,711	7,350	15,061
19	Kaira	379,702	331,203	710,905	14,234	12,661	26,895
20	Panch Mahális	193,385	181,446	374,831	7,621	7,461	15,082
21	Ahmedabad	473,693	444,231	887,924	18,707	17,189	35,896
	Sind Registration District.						
22	Karáchi	302,563	228,094	530,657	7,880	6,955	14,835
23	Hyderabad	316,834	250,415	567,249	5,713	4,420	10,133
24	Thar and Párkar	221,074	175,233	396,307	6,092	4,603	10,695
25	Nawabshah	233,826	184,826	418,652	6,153	4,676	10,829
26	Lárkána	331,204	266,733	597,937	7,817	5,993	13,810
27	Sukkur	281,493	227,869	509,362	7,851	6,226	14,077
28	Upper Sind Frontier	134,321	106,293	240,614	2,799	2,071	4,870
	Total for the Presidency ..	10,048,817	9,116,797	19,165,614	368,823	341,312	710,135

III

ISTRICTS *of the* BOMBAY PRESIDENCY *during the year 1926*

5			6	7	8	9		
RATIO OF BIRTHS PER 1,000 OF POPULATION.			Number of males born to every 100 females born.	Excess of Births over Deaths per 1,000 of Population.	Excess of Deaths over Births per 1,000 of Population.	MEAN RATIO OF BIRTHS PER 1,000 DURING PREVIOUS FIVE YEARS.		
Male.	Female.	Total.				Male.	Female.	Total.
24·46	22·51	46·67	123·79	9·83	..	23·45	22·02	45·47
21·53	23·76	48·29	103·26	17·41	..	23·01	21·83	44·84
23·02	21·60	44·62	106·54	11·40	..	21·79	20·22	42·01
17·87	16·56	34·43	107·12	12·27	..	16·22	15·17	31·39
10·06	9·37	19·43	107·33	.....	·36	9·10	8·29	17·39
21·11	20·17	41·28	104·66	14·02	..	19·48	18·23	37·71
9·24	8·80	18·02	105·13	.....	9·54	9·02	8·57	17·59
25·10	24·10	49·20	104·26	18·21	..	22·43	20·91	43·34
17·98	16·51	34·49	108·99	5·53	..	17·12	15·66	32·78
23·38	22·06	45·44	105·99	15·42	..	20·21	19·01	39·22
21·62	20·52	42·14	105·37	11·36	..	19·95	18·89	38·84
20·71	19·46	40·17	106·42	17·09	..	18·29	17·14	35·43
21·97	21·08	43·05	104·19	15·09	..	20·10	18·97	39·07
19·02	18·29	37·31	103·98	5·59	..	18·38	17·61	35·99
21·95	21·44	43·39	102·37	14·58	..	19·35	18·59	37·94
17·61	16·43	34·04	107·20	2·92	..	17·89	16·80	34·69
21·13	19·96	41·09	105·86	5·88	..	19·67	18·32	37·99
25·06	23·89	48·95	104·91	7·34	..	22·64	21·61	44·25
20·02	17·81	37·83	112·42	2·97	..	19·59	17·29	36·88
20·33	19·90	40·23	102·14	9·52	..	19·46	18·27	37·73
21·06	19·36	40·42	108·83	3·90	..	19·14	17·59	36·73
14·84	13·16	28·00	113·30	6·36	..	12·62	10·92	23·54
10·07	7·87	17·94	129·25	.....	·60	9·7	7·83	17·50
15·37	11·61	26·98	132·35	2·06	..	10·82	8·64	19·46
14·69	11·17	25·86	131·59	6·21	..	12·13	9·13	21·50
13·07	10·02	23·09	130·44	6·17	..	12·27	10·19	21·46
15·11	12·23	27·62	126·10	7·86	..	15·27	12·28	27·55
11·63	8·60	20·23	135·15	6·35	..	11·85	8·87	20·72
19·24	17·81	37·05	108·06	8·50	..	17·80	16·37	34·17

ANNUAL FORM NO. II.—*Showing the* BIRTHS *and* DEATHS *registered*

1	2	3	4	5	
Number.	Districts.	Area in square miles.	Average population per square mile.	POPULATION (CENSUS	
				Male.	Female.
	Western Registration District.				
1	East Khándesh	4,551	236	545,376	529,748
2	West Khándesh	5,133	113	309,511	303,201
3	Násik	5,877	140	418,510	406,706
4	Thána	3,434	220	388,310	363,589
5	Bombay Suburban	142	1,066	87,567	63,874
6	Kolába	2,169	259	279,350	283,123
7	Bombay City	24	47,867	751,948	396,887
	Central Registration District.				
8	Ahmednagar	6,610	109	362,047	361,031
9	Poona	5,357	184	500,601	487,050
10	Sholápur	4,556	163	382,374	359,256
11	Sátára	4,910	209	511,238	514,457
12	Ratnágiri	3,989	289	525,085	628,895
	Southern Registration District.				
13	Belgaum	4,611	206	484,615	465,047
14	Dhárwár	4,606	225	528,348	507,861
15	Bijápur	5,707	139	405,148	391,208
16	Kánara	3,946	102	203,950	197,526
	Gujarát Registration District.				
17	Surat	1,651	408	337,276	336,845
18	Broach	1,468	210	158,568	149,143
19	Kaira	1,596	445	379,702	331,203
20	Panch Mahális	1,606	233	193,385	181,446
21	Ahmedabad	3,824	232	473,693	414,231
	Sind Registration District.				
22	Karáchi	11,231	47	302,563	228,094
23	Hyderabad	4,417	128	316,834	259,415
24	Thar and Párkar	13,636	29	221,074	175,233
25	Nawabshah	3,889	107	233,826	184,826
26	Lárkána	5,057	118	331,204	266,733
27	Sukkur	5,612	91	281,493	227,569
28	Upper Sind Frontier	2,664	90	134,321	106,293
	Total for the Presidency ...	122,578	126	10,048,817	9,116,797

in the DISTRICTS *of the* BOMBAY PRESIDENCY *during the year 1926*

	6		7			8
1921).	BIRTHS.		NUMBER OF DEATHS REGISTERED.			Number of Deaths of males to every 100 deaths of females.
Total.	Total Number.	Birth-rate per 1,000 of population.	Male.	Female.	Total.	
1,075,122	50,185	46·67	20,123	19,489	39,612	103·25
612,712	29,586	48·29	9,499	9,418	18,917	100·86
825,216	36,522	44·62	14,065	13,345	27,410	105·39
756,899	26,052	34·43	8,503	8,274	16,777	102·77
151,141	2,912	19·43	1,544	1,452	2,996	106·34
562,472	23,221	41·28	7,804	7,529	15,333	103·65
1,148,815	20,704	18·02	17,237	14,4.0	31,657	119·54
723,978	35,621	49·20	11,867	10,579	22,446	112·17
987,681	34,069	34·49	15,684	13,517	28,601	111·59
741,630	33,702	45·44	11,481	10,783	22,264	106·47
1,025,695	43,230	42·14	15,949	15,63	31,579	102·31
1,153,980	46,352	40·17	13,142	13,488	26,630	97·43
949,662	40,882	43·05	13,328	13,233	26,561	100·72
1,036,209	38,660	37·31	16,780	16,088	32,868	104·30
796,356	34,550	43·39	11,651	11,287	22,941	103·25
401,476	13,665	34·04	6,344	6,149	12,493	103·17
674,121	27,699	41·09	11,878	11,859	23,737	100·16
307,711	15,064	48·95	6,289	6,515	12,804	96·53
710,905	26,895	37·83	12,798	11,984	24,782	106·79
374,831	15,082	40·23	5,649	5,863	11,512	114·75
887,924	35,896	40·42	16,720	15,707	32,427	106·45
530,657	14,835	28·00	6,251	5,264	11,455	120·12
567,249	10,133	17·94	5,919	4,653	10,572	127·21
396,307	10,695	26·98	5,331	4,546	9,877	117·26
418,652	10,829	25·86	4,070	3,461	7,531	117·60
597,937	13,810	23·09	5,547	4,572	10,119	121·11
509,362	14,077	27·63	5,486	4,535	10,021	120·99
240,614	4,870	20·23	1,768	1,574	3,342	112·32
19,165,614	710,135	37·05	282,110	265,154	547,264	106·39

ANNUAL FORM

1	2								
Number.	Districts.				DEATHS PER 1,000 OF				
					Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.
	Western Registration District.								
1	East Khándesh	...	...	...	·03	·23	1·21	16·66	3·12
2	West Khándesh	...	...	...	...	·01	·01	12·85	1·41
3	Násik	...	...	...	·01	·12	...	14·76	2·24
4	Thána	...	...	...	...	·11	·13	10·42	·75
5	Bombay Suburban	...	...		...	·17	·21	6·02	2·06
6	Kolába	...	...	...	...	·05	·30	12·00	1·52
7	Bombay City	...	...	...	...	·41	·05	2·74	2·00
	Central Registration District.								
8	Ahmednagar	...	...	...	...	·03	·08	6·40	3·45
9	Poona	...	...	...	...	·07	...	10·52	2·39
10	Sholápur	...	...	...	·01	·07	·03	10·88	2·37
11	Sátára	...	...	...	...	·04	2·39	11·20	3·12
12	Ratnágiri	...	...	...	...	·21	·06	6·27	1·04
	Southern Registration District.								
13	Belgaum	...	...	...	·00	·13	·75	7·61	3·65
14	Dhárwár	...	...	...	...	·03	3·83	10·29	1·05
15	Bijápur	...	...	...	·00	·09	1·01	11·52	1·84
16	Kánara	...	...	...	·01	·46	·36	10·51	4·04
	Gujarát Registration District.								
17	Surat	...	...	...	...	1·14	...	11·38	1·74
18	Broach	...	...	...	...	·07	...	13·24	1·36
19	Kaira	...	...	...	·00	·00	...	12·37	1·85
20	Panch Mahals	...	...	...	...	·22	...	17·66	1·27
21	Ahmedabad	...	...	...	...	·10	...	16·99	1·34
	Sind Registration District.								
22	Karáchi	...	...	...	...	·66	·05	9·93	·89
23	Hyderabad	...	...	...	...	·19	...	12·75	·29
24	Thar and Párkar	...	...	...	...	·45	...	19·54	·25
25	Nawabshah	...	...	...	...	·38	...	15·70	·04
26	Lárkána	...	...	...	...	·46	...	15·01	·03
27	Sukkur	...	...	...	·00	·10	...	16·20	·13
28	Upper Sind Frontier	...	...	...	...	·07	...	13·01	·02
	Total for the Presidency			...	·00	·20	·51	11·61	1·78

No. II—*contd.*

9						10		
Population from						Mean ratio of deaths per 1,000 during previous five years.		
Respiratory Diseases.	Injuries.	All other causes.	All causes.					
			Male.	Female.	Total.	Male.	Female.	Total.
5·09	·20	10·23	36·89	36·79	36·84	31·33	30·80	31·07
4·55	·34	10·07	30·69	31·06	30·87	26·79	25·86	26·33
6·03	·36	9·09	33·00	32·83	33·21	29·99	27·94	28·98
3·72	·53	6·51	21·90	22·45	22·17	24·59	23·25	23·93
4·08	·56	6·68	17·63	22·73	19·78	17·68	19·00	18·24
5·06	·40	8·03	27·94	26·59	27·26	27·50	25·47	26·48
11·65	·60	10·10	22·92	36·33	27·56	29·58	43·61	34·42
6·18	·30	14·56	32·70	29·30	31·00	31·20	28·41	29·82
6·71	·40	8·87	30·13	27·75	28·96	29·16	27·07	28·13
3·65	·47	12·54	30·03	30·01	30·02	31·39	31·21	31·30
2·79	·47	10·77	31·20	30·39	30·78	26·03	24·71	25·37
4·67	·51	9·62	25·02	21·44	23·08	24·49	20·23	22·17
3·89	·45	11·49	27·50	28·46	27·97	24·84	25·30	25·07
3·46	·38	12·68	31·76	31·68	31·72	28·84	29·55	29·19
3·56	·43	10·35	28·76	28·86	28·81	26·12	25·58	25·85
2·29	·55	12·90	31·15	31·13	31·12	29·16	28·80	28·98
12·24	·38	8·38	35·22	35·21	35·21	26·55	25·25	25·91
11·72	·42	8·80	39·66	43·68	41·61	29·04	29·98	29·50
11·86	·57	8·21	33·71	36·18	34·86	24·98	25·71	25·31
3·87	·36	7·33	29·21	32·31	30·71	19·03	18·80	18·91
9·78	·40	7·91	35·30	37·92	36·52	28·26	29·41	28·80
4·77	·28	5·00	20·66	22·81	21·68	18·28	19·34	18·73
3·47	·16	1·77	18·69	18·58	18·63	14·39	13·93	14·19
2·94	·25	1·49	24·13	25·94	24·92	15·37	14·90	15·17
·90	·30	·67	17·40	18·70	17·99	13·25	13·29	13·27
·29	·23	·90	16·75	17·14	16·92	13·75	14·01	13·86
·71	·27	2·27	19·49	19·90	19·68	16·93	18·42	17·60
·21	·20	·36	13·16	14·81	13·88	11·85	12·36	12·11
5·38	·40	8·07	28·07	29·08	28·55	25·32	25·41	25·36

ANNUAL FORM No. III.—DEATHS *registered in the* DISTRICTS *of the*

1	2	3				
Number.	Districts.	January.	February.	March.	April.	May.
	Western Registration District.					
1	East Khándesh	2,726	2,810	3,145	2,415	2,860
2	West Khándesh	1,636	1,351	1,520	1,239	1,406
3	Násik	1,936	2,062	2,823	2,196	2,291
4	Thána	1,431	1,208	1,829	1,467	1,345
5	Bombay Suburban	188	220	219	204	207
6	Kolaba	1,292	1,106	1,388	1,145	1,264
7	City of Bombay	2,417	2,249	2,445	2,472	2,469
	Central Registration District.					
8	Ahmednagar	1,217	1,215	1,514	1,618	1,825
9	Poona	1,871	1,661	2,186	2,131	2,525
10	Sholápur	1,260	1,157	1,492	1,651	2,020
11	Sátára	2,083	1,891	2,113	2,073	2,361
12	Ratnágiri	2,266	1,997	2,396	2,099	1,968
	Southern Registration District.					
13	Belgaum	1,684	1,665	2,241	2,169	2,249
14	Dhárwár	3,539	2,977	2,738	2,417	2,399
15	Bijápur	1,668	1,512	1,664	1,888	2,046
16	Kánara	1,232	1,052	1,106	826	857
	Gujarát Registration District.					
17	Surat	1,571	1,577	2,275	2,015	1,978
18	Broach	844	898	1,038	1,076	1,121
19	Kaira	1,307	1,521	2,249	1,912	2,002
20	Panch Mahás	760	838	1,162	934	929
21	Ahmedabad	2,298	2,139	2,820	2,613	2,587
	Sind Registration District.					
22	Karáchi	1,343	1,036	1,020	937	865
23	Hyderabad	1,476	1,180	962	892	966
24	Thar and Párkar	1,361	1,029	1,140	1,028	781
25	Nawabshah	1,190	728	680	553	609
26	Lárkána	1,315	878	943	785	876
27	Sukkur	1,111	872	875	868	889
28	Upper Sind Frontier	404	319	297	312	298
	Total for the Presidency ...	43,276	39,148	46,319	41,937	43,993
	Ratio of deaths per 1,000 in each month	2·26	2·04	2·42	2·19	2·30

BOMBAY PRESIDENCY *during each month of the year 1926*

							4	5
June.	July.	August.	September.	October.	November.	December.	Total Deaths registered during the year.	Number.
2,842	2,858	4,377	5,161	4,405	3,409	2,604	39,612	1
1,142	1,309	1,875	2,285	1,902	1,759	1,493	18,917	2
2,150	2,302	2,588	2,285	2,279	2,377	2,121	27,410	3
1,234	1,233	1,579	1,492	1,277	1,350	1,332	16,777	4
192	330	327	270	211	324	304	2,996	5
1,077	1,331	1,579	1,446	1,278	1,190	1,237	15,333	6
2,583	3,177	3,207	2,964	2,821	2,590	2,313	31,657	7
1,881	2,522	2,620	2,336	2,035	1,891	1,742	22,446	8
2,380	2,902	3,239	2,824	2,487	2,237	2,155	28,601	9
1,690	2,138	2,437	2,462	2,286	1,928	1,743	22,264	10
2,328	3,022	3,359	3,673	3,364	2,835	2,477	31,579	11
1,798	2,138	2,304	2,393	2,329	2,339	2,603	26,630	12
2,362	2,657	2,607	2,400	2,282	2,139	2,106	26,561	13
2,146	2,652	2,729	2,665	2,736	2,915	2,955	32,868	14
1,881	2,176	2,234	1,950	2,079	2,095	1,808	22,941	15
845	1,134	1,301	1,087	939	959	1,155	12,493	16
1,828	2,175	2,380	2,091	1,849	2,059	1,930	23,737	17
1,002	1,090	1,303	1,253	1,208	1,109	860	12,804	18
1,754	1,788	2,566	2,902	2,632	2,412	1,737	24,782	19
873	885	1,212	1,313	1,069	842	689	11,512	20
2,125	1,906	3,216	3,472	3,175	3,414	2,752	32,427	21
824	621	661	932	1,082	1,031	1,103	11,455	22
587	469	470	622	748	1,083	1,117	10,572	23
625	487	314	375	876	894	967	9,877	24
434	394	308	332	622	937	744	7,531	25
634	652	605	588	838	1,070	935	10,119	26
657	736	535	685	915	1,038	840	10,021	27
244	239	173	143	345	299	269	3,342	28
40,068	45,323	52,105	52,401	50,069	48,525	44,100	547,264	
2·09	2·36	2·72	2·73	2·61	2·53	2·30	28·55	

ANNUAL FORM NO. IV.—DEATHS *registered according to* AGE *in*

1	2	3	
No.	Districts.	Under 1 year.	
		Male.	Female.
	Western Registration District.		
1	East Khándesh	6,563	5,341
2	West Khándesh	3,045	2,667
3	Násik	4,320	3,553
4	Thána	1,921	1,637
5	Bombay Suburban	343	332
6	Kolába	2,034	1,675
7	Bombay City	4,331	3,822
	Central Registration District.		
8	Ahmednagar	3,844	3,032
9	Poona	4,331	3,401
10	Sholápur	3,789	3,099
11	Sátára	4,171	3,364
12	Ratnágiri	2,300	1,953
	Southern Registration District.		
13	Belgaum	3,255	2,613
14	Dhárwár	3,512	2,715
15	Bijápur	2,945	2,425
16	Kánara	1,480	1,250
	Gujarat Registration District.		
17	Surat	3,405	3,181
18	Broach	1,957	1,762
19	Kaira	2,997	2,710
20	Panch Mahals	1,491	1,309
21	Ahmedabad	5,115	4,464
	Sind Registration District.		
22	Karáchi	1,791	1,617
23	Hyderabad	1,211	1,060
24	Thar and Parkar	922	859
25	Nawabshah	816	776
26	Larkana	1,188	1,024
27	Sukkur	1,480	1,239
28	Upper Sind Frontier	365	322
	Total for the Presidency ...	75,021	63,192
	Population according to Census of 1921 ...	287,146	282,999
	Ratios per 1,000 living ...	261·29	223·26

the DISTRICTS *of the* BOMBAY PRESIDENCY *during the year 1926*

4		5		6		7	
1 year and under 5.		5 and under 10.		10 and under 15.		15 and under 20.	
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
5,759	5,925	821	828	442	504	301	478
2,537	2,668	407	429	206	245	158	196
3,601	3,661	528	466	260	264	157	349
1,227	1,225	409	395	241	222	197	276
259	304	78	65	41	39	41	53
1,239	1,251	329	362	164	180	147	192
2,553	2,754	416	506	258	390	465	593
2,360	2,254	389	387	243	274	215	289
3,342	2,938	485	478	300	313	263	403
2,583	2,573	451	424	189	222	139	290
3,735	3,897	713	813	456	478	393	580
1,965	1,896	537	528	334	319	283	330
3,059	3,473	712	855	405	406	260	334
2,891	3,017	991	1,090	803	854	450	544
2,368	2,506	592	575	329	331	217	277
748	783	283	301	178	186	150	222
2,675	2,736	550	572	224	231	196	318
1,967	2,029	273	266	109	89	70	107
3,756	3,485	429	341	207	203	202	232
1,438	1,427	310	283	130	122	108	151
4,054	3,991	511	504	283	332	393	503
1,124	1,112	291	263	164	161	209	250
963	822	348	293	217	170	211	247
725	710	352	351	269	161	213	217
647	535	249	218	169	131	172	201
1,000	880	453	406	229	156	219	213
1,085	874	315	239	181	146	178	216
384	349	134	130	68	59	57	58
60,144	60,035	12,368	12,365	7,099	7,188	6,095	8,109
885,160	924,937	1,468,775	1,379,851	1,224,010	969,652	751,226	650,813
67·95	64·89	8·42	8·96	5·72	7·41	8·11	12·46

ANNUAL FORM

1	2	3	
No.	Districts.	20 and under 30.	
		Male.	Female.
	Western Registration District.		
1	East Khándesh	663	1,099
2	West Khándesh	317	526
3	Násik	509	803
4	Thána	625	927
5	Bombay Suburban	114	156
6	Kolába	442	639
7	Bombay City	2,011	1,703
	Central Registration District.		
8	Ahmednagar	432	592
9	Poona	753	1,074
10	Sholápur	424	653
11	Sátára	903	1,097
12	Ratnágiri	910	1,286
	Southern Registration District.		
13	Belgaum	642	847
14	Dhárwár	1,175	1,608
15	Bijápur	619	843
16	Kánara	496	759
	Gujarat Registration District.		
17	Surat	575	941
18	Broach	199	384
19	Kaira	554	693
20	Panch Mahàls	249	433
21	Ahmedabad	968	1,137
	Sind Registration District.		
22	Karáchi	555	507
23	Hyderabad	650	616
24	Thar and Párkar	572	592
25	Nawábsháh	423	497
26	Lárkána	471	625
27	Sukkur	394	504
28	Upper Sind Frontier	167	188
	Total for the Presidency ...	16,817	21,729
	Population according to Census of 1921 ...	1,781,925	1,656,476
	Ratios per 1,000 living ...	9·44	13·12

No. IV.—*concld.*

9		10		11		12		13
30 and under 40.		40 and under 50.		50 and under 60.		60 and upwards.		
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	No.
850	936	982	706	955	745	2,787	2,927	1
424	500	550	360	545	372	1,310	1,455	2
851	847	868	633	909	649	2,053	2,320	3
826	954	903	641	786	622	1,377	1,375	4
140	140	150	84	123	56	255	233	5
691	693	710	474	732	581	1,316	1,472	6
2,166	1,308	1,759	814	1,263	701	2,014	1,839	7
647	649	649	478	815	590	2,273	2,034	8
1,001	936	979	709	1,028	740	2,596	2,525	9
569	554	526	451	647	509	2,070	2,006	10
943	918	873	763	1,161	956	2,596	2,764	11
969	1,153	1,000	848	1,241	963	3,493	4,212	12
804	812	665	604	915	673	2,391	2,586	13
1,468	1,505	1,377	960	1,405	1,064	2,708	2,731	14
762	754	717	583	871	699	2,244	2,294	15
744	622	752	447	600	488	913	1,091	16
720	801	795	590	797	542	1,941	1,957	17
234	333	278	280	399	311	803	954	18
786	826	857	756	992	694	2,018	2,044	19
315	464	344	276	407	342	857	1,056	20
1,128	1,010	1,116	835	1,262	849	1,885	2,085	21
591	379	508	252	383	192	645	471	22
665	460	589	326	469	232	596	427	23
619	508	522	359	408	308	609	481	24
444	426	387	228	309	188	454	261	25
544	441	472	272	387	205	584	400	26
413	380	402	253	351	209	687	482	27
124	156	131	98	117	57	221	157	28
20,448	19,495	20,061	14,070	20,271	14,530	43,786	44,441	
1,642,370	1,349,143	1,025,082	901,989	615,661	556,308	457,220	480,976	
12·45	14·45	19·57	15·60	32·92	26·12	95·76	92·40	

ANNUAL FORM NO. IV (*a*).—*Showing the details of* DEATHS *during the*

DEATHS

No.	Districts.	Not exceeding one month.						
		Male.			Female.			Total of columns 5 and 8.
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total.	
1	2	3	4	5	6	7	8	9
	Western Registration District.							
1	East Khándesh	1,318	999	2,317	1,003	893	1,896	4,213
2	West Khándesh	596	472	1,068	516	379	895	1,963
3	Násik	935	654	1,589	712	549	1,261	2,850
4	Thána	544	344	888	436	330	766	1,654
5	Bombay Suburban	126	37	163	102	41	143	306
6	Kolába	699	349	1,048	492	311	803	1,851
7	Bombay City	1,042	627	1,669	743	510	1,253	2,922
	Central Registration District.							
8	Ahmednagar	927	552	1,479	702	454	1,156	2,635
9	Poona	815	616	1,431	645	474	1,119	2,550
10	Sholápur	794	621	1,415	630	511	1,141	2,556
11	Sátára	814	615	1,429	655	542	1,197	2,626
12	Ratnágiri	631	499	1,130	508	381	889	2,019
	Southern Registration District.							
13	Belgaum	759	622	1,381	566	496	1,062	2,443
14	Dhárwár	827	693	1,520	565	525	1,090	2,610
15	Bijápur	610	568	1,178	468	410	878	2,056
16	Kánara	600	315	915	476	242	718	1,633
	Gujarát Registration District.							
17	Surat	709	563	1,272	619	499	1,118	2,390
18	Broach	344	303	647	315	271	586	1,233
19	Kaira	437	439	876	453	428	881	1,757
20	Panch Mahális	190	248	438	179	203	382	820
21	Ahmedabad	844	712	1,556	641	489	1,130	2,686
	Sind Registration District.							
22	Karachi	385	289	674	327	232	559	1,233
23	Hyderabad	212	214	426	206	194	400	826
24	Thar and Párkar	245	148	393	203	134	337	730
25	Nawabshah	181	195	376	198	162	360	736
26	Lárkána	233	270	503	164	201	365	868
27	Sukkur	232	280	512	190	228	418	930
28	Upper Sind Frontier	79	67	146	56	60	116	262
	Total for the Presidency ...	16,128	12,311	28,439	12,770	10,149	22,919	51,358

under one year IN THE DISTRICTS *of the* BOMBAY PRESIDENCY *year 1926*

UNDER ONE YEAR.

Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total, male columns 5, 10 and 13.	Total, Female columns 8, 11 and 14.	Total.	No.
Male.	Female.	Total.	Male.	Female.	Total.				
10	11	12	13	14	15	16	17	18	19
2,321	1,792	4,113	1,925	1,653	3,578	6,568	5,341	11,904	1
1,168	989	2,157	809	783	1,592	3,045	2,667	5,712	2
1,605	1,380	2,985	1,135	912	2,047	4,329	3,553	7,882	3
772	624	1,396	261	247	508	1,921	1,637	3,558	4
101	102	203	79	77	156	343	322	665	5
709	614	1,323	277	258	535	2,034	1,675	3,709	6
1,200	1,043	2,243	1,462	1,526	2,988	4,331	3,822	8,153	7
1,487	1,141	2,628	878	735	1,613	3,844	3,032	6,876	8
1,493	1,167	2,660	1,407	1,115	2,522	4,331	3,401	7,732	9
1,239	1,016	2,255	1,135	942	2,077	3,789	3,099	6,888	10
1,693	1,322	3,015	1,049	845	1,894	4,174	3,364	7,535	11
791	649	1,440	469	415	884	2,390	1,953	4,343	12
1,183	978	2,161	691	573	1,264	3,255	2,613	5,868	13
1,228	979	2,207	764	646	1,410	3,512	2,715	6,227	14
1,144	964	2,108	623	583	1,206	2,945	2,425	5,370	15
380	363	743	185	169	354	1,480	1,250	2,730	16
1,240	1,191	2,431	893	872	1,765	3,405	3,181	6,586	17
701	657	1,358	609	519	1,128	1,957	1,762	3,719	18
1,143	1,041	2,184	978	788	1,766	2,997	2,710	5,707	19
655	569	1,224	398	358	756	1,491	1,309	2,800	20
1,670	1,474	3,144	1,889	1,860	3,749	5,115	4,464	9,579	21
532	489	1,021	585	569	1,154	1,791	1,617	3,408	22
346	261	607	439	399	838	1,211	1,060	2,271	23
250	250	500	279	272	551	922	859	1,781	24
205	193	398	235	223	458	816	776	1,592	25
286	284	570	399	375	774	1,188	1,024	2,212	26
441	342	783	527	479	1,006	1,480	1,239	2,719	27
120	84	204	99	122	221	365	322	687	28
26,163	21,958	48,061	20,479	18,315	38,794	75,021	63,192	138,213	

ANNUAL FORM No. V.—DEATHS *registered according* PRESIDENCY *during*

1	2				
		POPULATION			
No.	Districts.	Muhammadans.		Hindus.	
		Male.	Female.	Male.	Female.
	Western Registration District.				
1	East Khandesh	55,176	52,333	484,070	472,143
2	West Khandesh	16,011	15,346	262,850	256,881
3	Nasik	23,805	21,948	388,491	379,357
4	Thana	17,411	14,481	354,764	338,299
5	Bombay Suburban	8,728	5,625	65,684	46,744
6	Kolaba	14,012	14,342	262,562	265,748
7	Bombay City	126,177	57,210	543,171	289,272
	Central Registration District.				
8	Ahmednagar	18,966	17,870	327,801	325,681
9	Poona	23,591	19,913	465,217	454,887
10	Sholapur	30,467	28,235	346,655	326,392
11	Satara	18,367	17,652	488,403	488,459
12	Ratnagiri	34,410	46,581	486,985	578,134
	Southern Registration District.				
13	Belgaum	40,675	38,943	418,962	403,209
14	Dharwar	73,484	69,553	446,006	430,469
15	Bijapur	48,940	47,185	354,458	342,191
16	Kanara	12,580	13,822	182,587	175,191
	Gujarat Registration District.				
17	Surat	28,071	28,179	279,888	280,147
18	Broach	36,085	33,903	117,003	110,217
19	Kaira	34,193	31,022	328,634	294,525
20	Panch Mahals	13,888	12,797	171,905	161,201
21	Ahmedabad	53,637	45,433	399,443	348,852
	Sind Registration District.				
22	Karachi	213,206	168,986	82,381	53,744
23	Hyderabad	231,341	178,455	87,318	71,811
24	Thar and Parkar	118,596	94,139	98,214	77,812
25	Nawabshah	181,280	139,855	52,448	44,900
26	Larkana	277,501	222,052	53,024	44,130
27	Sukkur	200,273	158,123	79,859	68,329
28	Upper Sind Frontier	120,494	95,783	13,561	10,294
	Total for the Presidency ...	2,071,538	1,689,766	7,637,589	7,130,018

N.B.—This and all the other Statements refer to Indians only and not to Europeans "Hindus"
Note.—Population by classes in Form V includes Jail figures.

to CLASSES *and* SEX, *in the Districts of the* BOMBAY
the year 1926

3

ACCORDING TO THE CENSUS OF 1921.

Jains.		Christians.		Parsis.		Other Classes.		Total.		Total.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
4,708	3,992	625	518	261	178	536	582	545,376	529,746	1,075,122
2,255	1,832	543	445	120	70	28,243	28,649	309,511	308,201	617,712
4,076	3,445	1,577	1,524	509	400	51	32	418,510	406,706	825,216
1,524	744	13,339	13,112	1,532	1,907	159	150	388,310	368,589	756,899
1,354	632	10,471	9,603	1,246	1,199	84	66	87,567	63,874	151,441
1,153	487	622	482	177	139	837	925	279,350	283,122	562,472
17,587	6,297	32,198	16,096	27,948	24,286	5,505	3,718	751,948	396,867	1,148,815
6,867	6,171	10,967	11,185	90	90	62	34	364,753	361,031	725,784
6,706	4,984	5,109	5,448	1,557	1,510	454	448	500,601	487,089	987,681
4,015	3,413	1,067	1,055	170	161	...	...	382,374	359,256	741,630
8,104	7,197	1,102	886	261	237	31	26	511,238	514,457	1,025,695
819	821	3,078	3,339	22	14	16	11	525,085	628,895	1,153,980
21,868	19,987	2,963	2,840	59	62	22	7	484,615	465,047	949,662
5,741	4,809	3,321	2,888	129	121	45	24	528,348	507,861	1,036,209
1,675	1,320	537	526	19	11	...	...	405,148	391,208	796,356
595	519	8,051	7,994	9	4	1	...	203,950	197,526	401,476
5,427	4,817	948	680	5,037	6,014	17,960	17,008	337,276	326,845	674,121
1,758	1,497	1,406	1,178	1,045	1,196	1,271	1,172	158,568	149,143	307,711
3,210	3,128	13,276	12,236	54	40	335	252	379,702	331,203	710,905
956	857	1,626	1,555	127	113	4,883	4,923	193,385	181,446	374,831
18,353	17,094	2,424	1,947	861	809	174	173	473,693	414,231	887,924
635	483	3,611	2,348	1,396	1,323	1,899	1,219	302,563	228,094	530,657
45	37	127	87	34	23	14	8	316,834	250,415	567,249
150	116	43	16	4	4	4,067	3,144	221,074	175,238	396,307
1	...	19	13	3	...	75	58	233,826	184,826	418,652
...	...	27	9	2	...	650	542	331,204	266,733	597,937
8	8	161	117	67	56	1,836	1,252	281,493	227,869	509,362
20	20	4	6	...	...	233	190	134,321	106,293	240,614
119,619	94,709	119,242	98,138	42,739	39,940	69,444	64,613	10,050,523	9,116,797	19,167,320

include Hindus of all castes. "Other Classes" include Buddhists, Sikhs, Jews and all others.

ANNUAL FORM

1	2					
No.	Districts	Muhammadans.		Hindus.		
		Male.	Female.	Male.	Female.	
	Western Registration District.					
1	East Khandesh	1,434	1,372	18,668	15,091	
2	West Khandesh	310	316	9,176	9,097	
3	Nasik	682	619	13,347	12,694	
4	Thana	416	407	7,784	7,538	
5	Bombay Suburban	204	165	1,111	1,099	
6	Kolaba	359	341	7,400	7,139	
7	Bombay City	3,801	3,102	11,703	9,840	
	Central Registration District.					
8	Ahmednagar	411	378	11,396	10,149	
9	Poona	652	614	14,332	12,807	
10	Sholapur	774	779	10,650	9,964	
11	Satara	540	470	15,257	15,032	
12	Ratnagiri	941	1,024	12,130	12,392	
	Southern Registration District.					
13	Belgaum	1,096	997	11,637	11,611	
14	Dharwar	2,238	2,066	14,354	13,842	
15	Bijapur	1,211	1,262	10,403	9,981	
16	Kanara	339	361	5,758	5,603	
	Gujarat Registration District.					
17	Surat	930	1,031	10,678	10,559	
18	Broach	1,295	1,379	4,918	5,053	
19	Kaira	1,325	1,180	11,241	10,620	
20	Panch Mahals	411	441	5,189	5,365	
21	Ahmedabad	2,136	1,994	14,080	13,165	
	Sind Registration District.					
22	Karachi	3,914	3,076	2,239	2,054	
23	Hyderabad	3,648	2,669	2,254	1,974	
24	Thar and Parkar	2,908	2,453	2,412	2,082	
25	Nawabshah	2,977	2,473	1,090	987	
26	Larkana	4,387	3,598	1,159	974	
27	Sukkur	3,270	2,570	2,212	1,958	
28	Upper Sind Frontier	1,515	1,309	252	265	
	Total for the Presidency ...	44,124	38,459	232,830	221,985	

No. V—*contd.*

8										
NUMBER OF DEATHS REGISTERED.										
Jains.		Christians.		Parsis.		Other Classes.		Total		Total.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
7	19	9	5	1	...	4	2	20,123	19,389	39,612
5	3	7	2	1	...	...	...	9,499	9,418	18,917
6	7	14	21	8	3	8	1	14,065	13,345	27,410
1	3	263	284	28	34	11	8	8,503	8,274	16,777
9	1	207	179	5	4	8	4	1,544	1,452	2,996
4	...	15	17	1	1	23	21	7,804	7,529	15,333
373	255	733	601	511	507	116	115	17,237	14,429	31,657
6	5	51	47	2	...	1	...	11,857	10,579	22,346
10	14	56	55	17	14	17	13	15,084	13,517	28,601
49	45	8	5	...	...	...	...	11,481	10,783	22,264
148	123	3	5	1	...	...	...	15,949	15,630	31,579
7	11	64	61	...	...	...	...	13,142	13,488	26,630
541	510	54	55	...	...	...	...	13,328	13,233	26,561
135	145	52	35	1	...	...	...	16,780	16,088	32,868
31	31	8	13	1	...	...	...	11,654	11,287	22,941
26	16	221	168	...	1	...	...	6,344	6,149	12,493
115	123	26	12	129	131	...	...	11,378	11,859	23,737
22	35	19	15	32	30	3	3	6,289	6,515	12,804
52	34	176	150	...	...	4	...	12,798	11,984	24,782
31	37	18	19	...	1	...	...	5,649	5,863	11,512
406	451	71	78	25	19	2	...	16,720	15,707	32,427
...	...	63	41	18	14	17	19	6,251	5,204	11,455
2	1	1	3	1	...	13	6	5,919	4,653	10,572
2	4	3	1	...	...	6	6	5,331	4,546	9,877
...	...	1	...	...	...	2	1	4,070	3,461	7,531
...	...	...	...	...	...	1	...	5,547	4,572	10,119
...	...	2	2	....	...	2	5	5,486	4,535	10,021
...	...	...	...	...	...	1	...	1,768	1,574	3,342
1,988	1,873	2,147	1,874	782	759	239	204	282,110	265,154	547,264

1	2							
No.	Districts.	Muhammadans.		Hindus.		Jains.		
		Male.	Female.	Male.	Female.	Male.	Female.	
	Western Registration District.							
1	East Khandesh	25·99	26·21	38·56	38·31	1·49	4·76	
2	West Khandesh	18·67	19·87	38·68	34·24	2·18	1·62	
3	Nasik	28·64	28·20	34·12	33·46	1·47	2·03	
4	Thana	23·69	23·11	21·94	22·28	·66	4·03	
5	Bombay Suburban	23·37	20·38	16·91	23·51	6·65	1·58	
6	Kolaba	25·62	24·48	28·19	26·76	3·47	...	
7	Bombay City	30·12	54·22	21·54	34·01	21·21	40·50	
	Central Registration District.							
8	Ahmednagar	21·62	21·16	34·77	31·16	0·90	0·81	
9	Poona	27·63	30·83	30·81	28·17	1·49	2·81	
10	Sholapur	25·40	27·59	30·72	30·49	12·20	13·18	
11	Satara	29·45	26·63	31·56	30·77	18·26	17·09	
12	Ratnagiri	27·35	21·98	24·91	21·43	8·55	13·40	
	Southern Registration District.							
13	Belgaum	26·81	25·60	27·77	28·94	24·74	25·92	
14	Dharwar	30·46	29·70	32·18	32·16	23·52	30·15	
15	Bijapur	24·74	26·95	29·35	29·17	18·51	23·48	
16	Kanara	26·48	26·12	31·48	31·98	43·70	30·83	
	Gujarat Registration District.							
17	Surat	33·13	36·69	38·16	37·69	21·19	25·53	
18	Broach	35·88	40·67	42·03	45·85	12·51	23·35	
19	Kaira	38·75	38·04	34·21	37·33	16·20	10·87	
20	Panch Mahals	29·59	34·46	30·19	33·28	32·43	43·17	
21	Ahmedabad	39·89	43·89	35·25	37·74	22·12	26·38	
	Sind Registration District.							
22	Karachi	13·35	18·20	27·17	38·21	...	...	
23	Hyderabad	15·76	14·95	25·81	27·48	44·44	27·08	
24	Thar and Parkar	24·52	26·05	24·56	26·75	13·33	33·59	
25	Nawabshah	16·42	17·67	20·78	21·75	...	...	
26	Larkana	15·88	16·20	21·68	22·02	...	...	
27	Sukkur	16·32	16·35	27·69	28·65	...	...	
28	Upper Sind Frontier	12·49	13·66	18·58	25·74	...	...	
	Total for the Presidency ...	21·30	22·76	30·48	31·13	16·62	19·78	

No. V—*concld.*

3

RATIO OF DEATHS PER 1,000 OF POPULATION.

Christians.		Parsis.		Other Classes.		Total.		
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Total.
14·40	9·65	3·83	...	7·46	3·44	36·69	36·79	36·84
12·82	4·48	8·06	...	...	...	29·24	29·71	29·47
8·88	13·78	15·72	7·50	156·86	31·25	33·60	32·83	33·21
19·72	21·65	18·28	17·13	69·18	53·33	21·87	22·44	22·15
19·65	18·63	4·01	3·33	95·00	60·60	17·62	22·73	19·77
27·33	35·27	5·65	7·19	27·48	22·70	27·94	26·59	27·26
22·76	37·34	18·28	20·87	21·07	30·93	22·92	36·33	27·56
4·65	4·22	22·22	...	16·13	...	32·70	29·30	31·00
10·96	10·10	10·92	9·27	37·44	29·02	30·13	27·75	28·96
7·49	4·74	...	...	...	...	30·03	30·01	30·02
2·72	5·64	3·83	...	...	...	31·20	30·38	30·79
20·79	18·27	...	...	...	...	25·02	21·44	23·08
17·95	19·18	...	...	...	...	27·50	28·46	27·97
15·66	12·12	7·75	...	...	...	31·76	31·68	31·72
54·90	24·71	52·63	...	...	...	28·76	28·85	28·81
27·45	21·02	...	250·00	...	...	31·15	31·13	31·12
27·42	17·65	25·61	21·78	...	...	35·22	35·21	35·22
13·51	12·73	30·62	25·51	2·36	2·56	39·66	43·68	41·61
13·26	12·26	...	...	11·94	...	33·71	36·18	34·86
11·07	12·22	...	8·85	...	...	29·21	32·31	30·71
29·29	40·06	29·04	23·09	11·49	...	35·30	37·92	36·52
17·44	17·53	12·89	10·58	8·89	15·58	20·66	22·81	21·58
7·87	34·48	29·41	...	928·57	750·00	18·69	18·58	18·63
69·76	62·50	...	...	14·75	1·90	24·11	25·94	24·92
53·15	...	...	...	26·66	17·24	17·40	18·70	17·99
...	...	...	...	1·53	....	16·75	17·14	16·92
12·41	17·09	...	...	1·08	3·99	19·49	19·90	19·68
...	...	...	...	4·29	...	13·16	14·31	13·88
18·01	19·09	18·30	19·00	3·44	3·15	28·07	29·08	28·55

ANNUAL FORM No. VI.—DEATHS *registered from* BOMBAY PRESIDENCY

Details regarding Births

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth-rate.
	A.—DISTRICTS (EXCLUDING TOWNS).					
	Western Registration District.					
1	East Khándesh	918,037	23,401	21,974	45,375	49·42
2	West Khándesh	568,809	14,256	13,847	28,103	49·40
3	Násik	705,858	17,517	16,488	34,005	48·17
4	Thána	694,658	12,721	11,806	24,527	35·31
5	Bombay Suburban	91,943	940	871	1,811	11·96
6	Kolába	533,270	11,596	11,118	22,714	42·59
	Central Registration District.					
7	Ahmednagar	667,106	17,396	16,762	34,158	51·20
8	Poona	770,334	15,622	14,373	29,995	38·94
9	Sholápur	574,999	13,727	13,084	26,811	46·62
10	Sátára	964,847	21,394	20,345	41,739	43·25
11	Ratnágiri	1,083,350	22,696	21,402	44,098	40·71
	Southern Registration District.					
12	Belgáum	871,163	19,688	18,937	38,625	44·34
13	Dhárwár	870,565	16,963	16,330	33,293	38·24
14	Bijápur	717,798	15,924	15,622	31,546	43·95
15	Kánara	350,246	6,341	5,906	12,247	34·97
	Gujarat Registration District.					
16	Surat	526,465	11,457	11,003	22,460	42·65
17	Broach	243,112	6,250	5,945	12,195	50·16
18	Kaira	604,528	12,061	10,505	22,566	37·32
19	Panch Mahals	331,791	6,752	6,514	13,266	39·98
20	Ahmedabad	568,759	11,794	10,732	22,526	39·60
	Sind Registration District.					
21	Karáchi	307,576	2,769	2,108	4,877	15·88
22	Hyderabad	480,469	3,903	2,729	6,632	13·80
23	Thar and Párkar	386,343	6,010	4,514	10,524	27·24
24	Nawábsháh	402,915	5,958	4,535	10,493	26·04
25	Larkana	562,636	7,140	5,399	12,539	22·26
26	Sukkur	394,216	5,765	4,474	10,239	26·22
27	Upper Sind Frontier	230,036	2,674	1,986	4,660	20·25
	Total of Districts ...	15,421,829	312,715	289,309	602,024	39·04

different causes in the DISTRICTS *and* TOWNS *of the*
during the year 1926
also shewn, column 4

5	6	7	8	9	10	11 INJURIES—(*continued on next page*).	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
35	249	975	16,510	2,951	4,729	3	4
1	3	9	8,176	778	2,526	7	4
4	26	1	11,200	1,612	4,038	5	5
...	83	66	7,507	453	2,385	23	14
...	17	4	598	200	399	3	4
1	27	76	6,587	332	2,726	3	5
3	20	55	4,484	2,420	4,137	8	7
2	21	...	8,675	1,630	4,043	12	8
3	43	10	5,545	1,401	1,802	11	5
3	43	2,423	11,178	3,060	2,603	13	8
1	234	64	7,661	1,133	5,087	5	13
2	119	600	6,731	3,030	3,308	25	19
...	25	3,564	9,561	892	2,569	33	16
1	54	688	8,628	1,343	2,432	30	9
2	172	143	4,095	1,344	808	12	6
2	102	...	6,621	569	6,349	6	17
...	22	...	4,958	353	2,896	4	5
1	3	...	6,703	1,124	7,362	14	24
...	75	...	5,783	459	1,300	10	6
...	23	...	10,436	474	2,865	3	4
..	257	...	3,268	19	424	2	1
...	57	...	6,369	27	825	3	11
...	180	...	7,620	94	1,107	1	5
...	158	...	6,346	18	360	6	5
...	255	...	8,349	8	123	7	4
1	40	...	6,673	23	104	8	3
...	17	...	3,031	4	45	6	5
62	2,325	8,678	193,103	26,621	67,492	263	214

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No.	2 Districts and Towns.	11 Injuries—contd.				12	13
		Wounding or Accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	A.—Districts (excluding Towns).						
	Western Registration District.						
1	East Khandesh	170	25	16	218	9,745	35,412
2	West Khandesh	107	48	6	172	6,152	17,817
3	Nasik	176	51	13	260	6,936	24,117
4	Thana	177	143	7	364	4,526	15,384
5	Bombay Suburban	52	11	2	72	510	1,800
6	Kolaba	123	76	6	213	4,339	14,801
	Central Registration District.						
7	Ahmednagar	145	31	15	206	10,100	21,425
8	Poona	228	50	12	310	6,130	20,871
9	Sholapur	211	30	4	261	6,827	15,902
10	Satara	319	100	11	451	10,376	30,137
11	Ratnagiri	213	329	3	563	10,418	25,161
	Southern Registration District.						
12	Belgaum	300	38	8	390	10,181	24,661
13	Dharwar	214	35	21	319	11,332	28,262
14	Bijapur	236	23	7	305	7,027	20,478
15	Kanara	168	17	...	203	4,749	11,426
	Gujarat Registration District.						
16	Surat	138	27	7	195	3,447	17,285
17	Broach	57	21	5	92	2,042	10,363
18	Kaira	232	61	23	351	4,922	20,466
19	Panch Mahals	74	42	...	132	2,324	10,163
20	Ahmedabad	110	69	23	208	2,416	16,422
	Sind Registration District.						
21	Karachi	34	20	...	57	217	4,242
22	Hyderabad	24	19	1	58	212	7,448
23	Thar and Parkar	42	50	...	98	530	9,629
24	Nawabshah	63	44	...	118	268	7,268
25	Larkana	74	43	...	128	281	9,144
26	Sukkur	72	18	...	101	185	7,127
27	Upper Sind Frontier	30	8	...	49	34	3,180
	Total of Districts ...	3,789	1,429	189	5,884	126,226	430,391

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
·04	·27	1·66	17·98	3·21	5·14	·24	10·62	38·57	31·62
...	·01	·02	14·37	1·37	4·44	·30	10·81	31·32	26·51
·01	·04	...	15·87	2·28	5·78	·35	9·83	34·16	29·80
...	·12	·10	10·81	·65	3·43	·52	6·52	22·15	23·80
...	·11	·03	3·94	1·32	2·63	·48	3·37	11·88	19·08
...	·05	·11	12·35	1·56	5·12	·39	8·14	27·75	27·26
...	·03	·08	6·72	3·63	6·20	·31	15·14	32·11	30·73
...	·03	...	11·26	2·19	5·25	·40	7·96	27·09	26·57
·01	·07	·02	9·62	2·46	3·13	·45	11·87	27·66	28·62
...	·05	2·51	11·59	3·17	2·70	·47	10·75	31·24	25·56
...	·22	·86	7·07	1·04	4·76	·52	9·62	23·23	22·32
·00	·14	·69	7·73	3·82	3·79	·45	11·69	28·31	25·27
...	·02	4·09	10·98	1·02	2·95	·37	13·02	32·46	29·33
·00	·08	·96	12·02	1·67	3·39	·42	9·79	28·53	25·39
·01	·49	·41	11·43	3·84	2·31	·59	13·56	32·62	30·70
...	·19	...	12·58	1·08	12·06	·37	6·55	32·83	25·02
...	·09	...	20·39	1·45	11·91	·38	8·40	42·62	29·88
...	...	...	11·09	1·86	12·46	·58	8·14	33·85	24·66
...	·23	...	17·43	1·38	4·19	·40	7·00	30·63	19·07
...	·04	...	18·35	·84	5·03	·36	4·25	28·87	24·75
...	·83	...	10·62	·06	1·38	·19	·70	13·78	10·79
...	·19	...	13·05	·06	1·71	·12	·44	15·50	11·97
...	·46	...	19·74	·24	2·89	·22	1·37	24·92	14·55
...	·39	...	15·75	·05	·59	·29	·66	18·03	13·34
...	·15	...	14·84	·01	·22	·23	·49	16·24	13·19
·00	·10	...	16·92	·06	·26	·25	·47	18·07	15·47
...	·07	...	13·18	·02	·19	·21	·15	13·82	11·81
·00	·15	·56	12·52	1·73	4·38	·38	8·19	27·91	24·16

1	2	3	4 Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth-rate.
	B.—TOWNS.					
	East Khándesh District.					
1	Jalgaon	23,696	343	265	608	25·65
2	Bhusáwal	24,933	351	274	625	25·07
3	Chopda	16,930	240	214	454	26·82
4	Dharangaon	14,824	267	203	470	31·70
5	Párola	12,079	227	200	427	35·35
6	Amalner	17,068	197	133	330	19·33
7	Erandol	12,489	263	240	503	40·27
8	Nasirabad	12,188	305	327	632	51·85
9	Chálisgaon	11,990	230	249	479	39·95
10	Yawal	10,888	153	129	282	25·90
	West Khandesh District.					
11	Dhulia	30,061	528	474	1,002	33·33
12	Nandurbár	13,842	246	235	481	34·75
	Nasik District.					
13	Násik	42,715	628	558	1,186	27·76
14	Yeóla	13,911	175	207	382	27·46
15	Málegaon	23,711	365	310	675	28·46
16	Igatpuri	9,977	101	80	181	18·14
17	Manmád	11,866	110	105	215	18·11
18	Trimbak	4,538	87	70	157	34·59
19	Deoláli Cantonment	12,640	11	10	21	1·66
	Thana District.					
20	Thána	22,116	192	158	350	15·82
21	Bhiwandi	12,188	205	182	387	31·75
22	Kalyán	17,573	282	265	547	31·12
23	Bassein	10,364	128	123	251	24·22
	Bombay Suburban District.					
24	Bándra	28,738	318	287	605	21·05
25	Kurla	26,059	261	257	518	19·88
26	Santa Cruz Cantonment	4,701	4	4	8	1·70

No. VI—*contd.*

5	6	7	8	9	10	11 INJURIES (*continued on next page*),	
						Suicide.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Male.	Female.
...	...	41	154	77	121	...	...
1	...	1	309	46	65	...	...
...	1	...	120	19	48	...	1
...	...	...	112	58	101	...	...
...	...	185	122	34	50	...	...
...	...	...	109	21	62	...	...
...	...	...	112	47	92	1	...
...	...	54	139	56	104	...	...
...	...	1	178	34	63	...	...
...	...	47	43	16	42	...	...
...	4	...	120	84	198	2	...
...	...	...	183	15	64	...	...
...	11	3	235	106	518	...	...
1	31	...	325	7	118	...	...
...	34	...	223	100	118	...	...
...	...	...	118	11	42	1	...
...	...	...	53	9	44	...	1
...	...	...	31	3	24	...	...
...	...	...	1	3	25	...	...
...	..	1	169	23	145	1	...
...	...	26	104	52	103	...	...
...	1	...	63	27	139	...	...
...	...	2	44	14	47	1	...
...	5	...	51	26	93	...	...
...	3	28	262	84	125	...	...
...	...	...	1	2	1	...	...

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1	2	11 INJURIES—*contd.*				12	13
No.	Districts and Towns.	Wounding or Accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B.—TOWNS.						
	East Khandesh District.						
1	Jalgaon	10	...	...	10	201	604
2	Bhusawal	18	...	...	18	229	669
3	Chopda	2	...	...	3	89	280
4	Dharangaon	10	...	...	10	154	435
5	Parola	3	...	...	3	99	493
6	Amalner	1	...	2	3	64	259
7	Erandol	4	...	1	6	144	401
8	Nasirabad	4	...	...	4	171	527
9	Chalisgaon	5	...	...	5	36	317
10	Yawal	3	...	...	3	64	215
	West Khandesh District.						
11	Dhulia	10	...	...	12	28	710
12	Nandurbar	18	3	1	22	106	390
	Nasik District.						
13	Nasik	30	1	1	32	695	1,600
14	Yeola	2	...	...	2	80	564
15	Malegaon	1	...	...	1	124	600
16	Igatpuri	3	...	...	4	50	210
17	Manmad	2	...	...	3	33	142
18	Trimbak	4	...	...	4	29	91
19	Deolali Cantonment	...	...	...	...	47	76
	Thana District.						
20	Thana	8	...	...	9	59	406
21	Bhiwandi	10	...	...	10	87	382
22	Kalyan	10	...	1	11	150	391
23	Bassein	3	...	1	5	102	214
	Bombay Suburban District.						
24	Bandra	9	1	...	10	273	458
25	Kurla	4	...	...	4	226	732
26	Santa Cruz Cantonment	...	...	...	...	2	6

No. VI—*contd.*

14.

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
...	...	1·73	6·49	3·25	5·11	·42	8·49	25·49	19·68
·01	...	·04	12·39	1·84	2·61	·71	9·18	26·83	21·70
...	·06	...	7·09	1·12	2·83	·18	5·25	16·54	29·41
...	...	...	7·56	3·91	6·62	·66	10·39	29·34	35·35
...	...	15·31	10·09	2·83	4·15	·25	8·18	40·81	25·34
..	....	...	6·39	1·23	3·62	·18	3·75	15·17	17·93
...	...	...	8·96	3·76	7·36	·48	11·53	32·11	34·67
...	...	4·43	11·40	4·51	8·53	·33	14·03	43·24	35·52
...	...	·08	14·84	2·84	5·26	·42	3·00	26·44	22·85
...	...	4·31	3·94	1·48	3·95	·28	5·88	19·75	21·18
...	·13	...	4·32	2·79	6·59	·40	9·38	23·61	23·81
...	...	...	13·22	1·08	4·62	1·69	7·66	28·17	21·27
...	·26	·07	5·50	2·48	12·13	·75	16·27	37·46	30·04
·07	2·23	...	23·37	·50	8·48	·14	5·75	40·54	33·50
...	1·43	...	9·40	4·22	4·98	·01	5·23	25·30	26·40
...	...	...	11·33	1·10	4·21	·30	5·01	22·05	16·70
...	...	...	4·47	·76	3·70	·25	2·78	11·96	12·05
...	...	...	6·84	·68	5·30	·88	6·40	20·10	22·47
...	...	...	·08	·23	1·98	...	3·72	6·01	7·43
...	...	·04	7·64	1·04	6·56	·41	2·67	18·36	23·65
...	...	2·13	8·53	4·27	8·45	·62	7·14	31·34	28·60
...	·05	...	3·58	1·54	7·91	·63	8·54	22·25	24·92
...	...	·19	4·25	1·35	4·54	·49	9·84	20·65	25·95
...	·17	...	1·73	·90	3·23	·35	9·50	15·93	18·23
...	·12	1·07	10·06	3·23	4·78	·15	6·68	28·09	18·34
...	...	...	·21	·43	·21	...	·43	1·28	1·44

1	2	3	4 Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth-rate.
	B.—TOWNS—*contd.*					
	Kolaba District.					
27	Alibág	5,253	67	50	117	22·27
28	Panwel	8,622	72	67	139	16·12
29	Mahád	7,192	79	60	139	19·32
30	Uran	8,135	61	51	112	13·77
31	City of Bombay	1,148,815	10,611	10,093	20,704	18·02
	Ahmednagar District.					
32	Ahmednagar	33,138	424	341	765	23·09
33	Sangamner	12,737	212	222	434	34·07
34	Ahmednagar Cantonment	10,997	141	123	264	24·00
	Poona District.					
35	Poona City	133,122	1,349	1,216	2,565	19·26
36	Poona Suburban	13,971	152	121	273	19·54
37	Bárámati	11,905	193	232	425	35·70
38	Khed	7,013	96	62	158	22·53
39	Lonávia	10,471	120	132	242	23·11
40	Junnár	7,376	99	84	183	24·81
41	Poona Cantonment	25,498	61	53	114	4·47
42	Kirkee do	7,991	66	48	114	14·27
	Sholapur District.					
43	Sholápur	119,347	2,648	2,474	5,122	42·92
44	Bársi	22,074	472	408	880	39·86
45	Pandharpur	25,210	494	395	889	35·26
	Satara District.					
46	Sátara	22,454	251	190	441	19·64
47	Wái	10,208	142	148	290	28·41
48	Karád	11,255	131	89	220	19·55
49	Ashta	9,016	156	166	322	35·71
50	Islámpur	7,915	106	112	218	27·54
	Ratnagiri District.					
51	Ratnágiri	18,286	243	233	476	26·03
52	Vengurla	19,126	389	370	759	39·68
53	Málwan	22,213	376	299	675	30·39
54	Chiplun	11,005	193	151	344	31·26

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
...	...	...	58	5	24	...	...
...	...	24	31	5	43	...	...
...	...	...	47	2	32	...	...
...	...	12	27	8	21	...	...
5	476	56	3,151	2,289	13,388	79	17
...	3	...	50	37	217	1	1
...	...	...	47	19	47	...	...
...	...	...	63	12	67	1	1
1	48	1	1,132	473	2,049	7	3
...	...	...	147	45	89	1	...
...	1	...	140	43	33	...	...
...	...	...	38	6	57	1	...
...	...	...	153	26	78	...	...
...	...	...	37	8	60	...	...
...	...	...	65	24	105	...	...
...	...	...	3	38	146	1	...
...	9	7	1,873	192	560	...	1
...	...	...	367	43	58	...	...
3	1	6	280	113	289	1	...
...	...	...	147	28	117	1	2
...	...	...	34	16	37	...	...
...	...	27	41	10	19	...	...
...	...	...	56	54	16	1	...
...	...	...	39	33	60	1	...
...	1	...	86	8	74	...	...
...	...	...	97	21	86	1	...
...	2	...	92	33	88	...	...
...	1	...	112	7	45	...	...

1	2	11 INJURIES—*contd.*				12	13
No.	Districts and Towns.	Wounding or Accident	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B.—TOWNS—*contd.*						
	Kolaba District.						
27	Alibag	2	...	...	2	42	131
28	Panwel	3	1	...	4	44	151
29	Mahad	3	...	...	3	41	121
30	Uran	5	...	...	5	52	125
31	City of Bombay	592	2	...	630	11,602	31,657
	Ahmednagar District.						
32	Ahmednagar	6	...	1	9	250	566
33	Sangamner	4	...	...	4	136	253
34	Ahmednagar Cantonment	1	...	...	3	57	202
	Poona District.						
35	Poona City	34	1	2	47	2,067	5,788
36	Poona Suburban	2	1	...	4	116	401
37	Baramati	6	...	...	6	131	344
38	Khed	1	...	...	2	42	145
39	Lonavla	17	...	...	17	52	326
40	Junnar	4	...	1	5	44	154
41	Poona Cantonment	1	...	1	2	88	284
42	Kirkee do.	2	...	...	3	98	288
	Sholapur District.						
43	Sholapur	39	4	5	49	1,462	4,172
44	Barsi	11	...	...	11	405	884
45	Pandharpur	25	1	...	27	587	1,306
	Satara District.						
46	Satara	14	...	...	17	305	614
47	Wai	3	...	1	4	83	174
48	Karad	3	...	...	3	159	250
49	Ashta	3	...	...	4	68	198
50	Islampur	2	2	...	5	60	197
	Ratnagiri District.						
51	Ratnagiri	4	1	...	5	132	306
52	Vengurla	8	...	...	9	267	480
53	Malvan	4	3	1	8	256	478
54	Chiplun	1	2	...	3	87	205

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-Pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes	
								For the year.	Mean of previous five years.
...	...	...	14·04	·85	4·57	·38	3·00	24·94	20·56
...	...	2·80	3·61	·57	4·98	·46	5·09	17·51	22·38
...	...	...	6·53	·28	4·45	·42	5·70	17·38	18·63
...	...	1·48	3·32	·98	2·58	·62	6·39	15·37	14·51
·00	·41	·05	2·74	2·00	11·65	·60	10·10	27·56	34·42
...	·09	...	1·51	1·12	6·55	·27	7·54	17·08	19·86
...	...	...	3·69	1·49	3·69	·31	10·68	19·86	16·57
...	...	...	5·73	1·08	6·10	·27	5·18	18·36	19·89
·01	·36	·01	8·51	3·55	15·16	·35	15·52	43·47	41·80
...	...	...	10·52	3·22	6·37	·29	8·30	28·70	21·45
...	·08	...	11·76	2·77	3·61	·51	10·16	28·89	23·13
...	...	...	5·42	·85	8·13	·29	5·99	20·68	16·96
...	...	...	14·61	2·48	7·45	1·62	4·97	31·13	25·57
...	...	...	5·02	1·08	8·14	·68	5·96	20·88	20·12
...	...	...	2·55	·95	4·11	·08	3·45	11·14	15·10
...	...	...	·38	4·75	18·27	·38	12·26	36·04	29·66
...	·08	·06	15·70	1·61	4·69	·41	12·41	34·96	37·58
...	...	...	16·62	1·95	2·63	·50	18·35	40·05	40·56
·12	·04	·24	11·11	4·48	11·46	1·07	23·28	51·80	54·51
...	...	...	6·55	1·25	5·20	·76	13·58	27·34	30·65
...	...	...	3·33	1·57	3·63	·39	8·13	17·05	22·00
...	...	2·40	3·64	·89	1·68	·26	14·14	23·01	15·00
...	...	...	6·21	5 99	1·77	·44	7·55	21·95	14·24
...	...	...	4·92	4·17	7·58	·63	7·58	24·88	19·10
...	·06	...	4·71	·43	4·04	·27	7·22	16·73	15·56
...	...	...	5·07	1·10	4·49	·47	13·97	25·10	25·30
...	·09	...	4·14	1·48	3·97	·36	11·48	21·52	20 23
...	·09	...	10·18	·64	4·09	·27	3·36	18·63	18·15

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth rate.
	B.—TOWNS—*contd.*					
	Belgaum District.					
55	Belgaum	35,214	544	514	1,058	29·22
56	Gokak	9,989	201	161	362	36·24
57	Athni	13,538	152	158	310	22·90
58	Nipani	11,878	237	217	454	38·22
59	Belgaum Cantonment	6,880	38	35	73	10·61
	Dharwar District.					
60	Dharwar	34,327	501	497	998	29·07
61	Hubli	69,140	1,049	918	1,967	28·45
62	Gadag-Bettigeri	41,158	792	833	1,625	39·48
63	Ranebennur	13,930	308	272	580	41·64
64	Nawalgund	7,089	94	103	197	27·79
	Bijapur District.					
65	Bijapur	32,471	575	494	1,069	32·30
66	Bagalkot	19,471	409	379	788	40·47
67	Guledgud	14,760	346	344	690	46·74
68	Ilkal	11,856	223	234	457	38·54
	Kanara District.					
69	Karwar	14,463	213	187	400	27·66
70	Kumta	14,291	163	151	314	21·97
71	Gokarn	6,307	137	137	274	32·98
72	Honawar	7,035	106	107	213	30·27
73	Bhatkal	7,134	110	107	217	30·42
	Surat District.					
74	Surat	117,424	2,318	2,076	4,394	37·42
75	Bulsar	19,681	334	271	605	30·74
76	Rander	10,547	135	105	240	22·76
	Broach District.					
77	Broach	42,626	897	888	1,785	41·87
78	Jambusar	10,217	279	270	549	53·73
79	Ankleshwar	11,756	285	247	532	45·25

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries.	
						Suicide.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Male.	Female.
...	6	96	187	39	172	2	...
...	...	8	64	48	49	...	...
...	...	...	112	9	64	1	1
...	...	...	101	30	82	...	...
...	...	11	32	6	16	...	...
...	...	84	247	102	201	3	...
...	...	147	396	31	400	...	2
...	4	103	391	40	310	1	2
...	...	71	52	15	72	...	...
...	...	...	19	5	33	1	1
...	...	117	145	66	132	3	...
...	...	...	210	51	98	...	...
...	16	...	148	6	105	...	1
...	1	...	46	1	70	...	...
...	...	...	40	7	26	...	...
...	2	...	55	109	33	...	...
...	...	...	26	37	32	1	...
...	11	...	40	86	7	...	...
...	...	...	55	33	15	...	...
...	641	2	887	580	1,614	1	...
...	7	...	38	11	218	1	...
...	20	...	123	11	74	...	...
...	1	...	480	55	497	2	...
...	...	...	201	10	165	...	...
...	...	...	282	...	47	...	...

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B.—TOWNS—*contd.*						
	Belgaum District.						
55	Belgaum	21	...	1	24	463	987
56	Gokak	1	...	...	1	87	257
57	Athni	5	...	...	7	40	233
58	Nipani	2	1	...	3	90	306
59	Belgaum Cantonment	...	...	...	...	53	118
	Dharwar District.						
60	Dharwar	15	...	2	20	375	1,029
61	Hubli	20	1	3	26	531	1,531
62	Gadag-Bettigeri	11	1	2	17	603	1,468
63	Ranebennur	3	...	...	3	225	438
64	Nawalgund	3	...	...	5	78	140
	Bijapur District.						
65	Bijapur	14	...	1	18	390	868
66	Bagalkot	11	...	2	13	275	647
67	Guledgud	3	...	...	4	277	556
68	Ilkal	2	...	...	2	273	392
	Kanara District.						
69	Karwar	3	...	1	4	131	203
70	Kumta	5	1	...	6	87	292
71	Gokarn	3	...	...	4	71	170
72	Honawar	3	...	...	3	79	226
73	Bhatkal	1	1	...	2	61	171
	Surat District.						
74	Surat	46	1	7	55	1,912	5,671
75	Bulsar	3	...	...	4	154	433
76	Randor	...	...	...	...	101	329
	Broach District.						
77	Broach	12	2	...	16	505	1,554
78	Jambusar	8	4	...	12	75	463
79	Ankleshwar	7	1	...	8	87	424

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes. For the year.	From all causes. Mean of previous five years.
...	·17	2·65	5·16	1·08	4·75	·66	12·79	27·25	27·64
...	...	·80	6·41	4·81	4·91	·10	8·71	25·73	27·93
...	...	...	8·27	·66	4·73	·52	2·95	17·14	18·02
...	...	...	8·50	2·53	5·90	·25	7·58	25·76	16·75
...	...	1·60	4·65	·86	2·33	...	7·70	17·15	10·71
...	...	2·44	7·20	2·97	5·86	·58	10·92	29·98	29·80
...	...	2·13	5·73	·45	5·79	·38	7·68	22·14	26·64
...	·10	2·50	9·50	·97	7·53	·41	14·65	35·67	26·04
...	...	5·10	3·73	1·08	5·17	·22	16·15	31·44	37·18
...	...	...	2·68	·71	4·66	·71	11·00	19·76	21·58
...	...	3·60	4·47	2·08	4·07	·55	12·01	26·73	24·91
...	...	...	10·79	2·62	5·08	·67	14·12	33·23	32·61
...	1·08	...	10·03	·40	7·11	·27	18·77	37·67	32·52
...	·08	...	3·88	·09	5·90	·17	22·94	33·06	36·69
...	...	...	2·77	·48	1·80	·28	9·06	14·38	14·45
...	·14	...	3·86	7·63	2·31	·42	6·09	20·43	15·60
...	...	...	3·13	4·45	3·85	·48	8·55	20·46	22·39
...	1·56	...	5·68	12·22	1·00	·43	11·23	32·13	18·05
...	...	...	7·71	5·33	2·10	·28	8·55	23·97	19·34
...	5·46	·02	7·55	4·94	13·74	·47	16·28	48·46	31·68
...	·36	...	1·93	·56	11·08	·20	7·82	21·95	16·03
...	1·90	...	11·66	1·04	7·01	...	9·58	31·19	21·16
...	·02	...	11·26	1·29	11·66	·38	11·85	36·46	27·97
...	...	...	19·68	·98	16·14	1·18	7·34	45·32	28·23
...	...	...	23·39	...	4·00	·68	7·40	36·07	26·14

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth rate.
	B.—TOWNS—*contd.*					
	Kaira District.					
80	Kaira ...	8,277	142	134	276	33·35
81	Mehmedabad ...	6,236	130	127	257	41·21
82	Nadiad ...	31,919	592	626	1,218	38·16
83	Borsad ...	12,113	355	321	676	55·81
84	Anand ...	11,024	167	150	317	28·76
85	Umreth ...	14,024	327	361	688	49·06
86	Dakore ...	7,990	145	141	286	35·79
87	Kapadvanj ...	14,794	315	296	611	41·30
	Panch Mahals District.					
88	Godhra ...	26,969	587	661	1,248	46·28
89	Dohad ...	16,071	282	286	568	35·34
	Ahmedabad District.					
90	Ahmedabad ...	2,70,599	5,966	5,529	11,495	42·47
91	Dhandhuka ...	8,056	178	185	363	45·05
92	Viramgaon ...	26,252	430	403	833	31·73
93	Dholka ...	12,513	323	327	650	51·94
94	Ahmedabad Cantonment. ...	1,745	16	13	29	16·61
	Karachi District.					
95	Karachi ...	199,014	4,832	4,610	9,442	47·43
96	Tatta ...	8,470	89	70	159	18·77
97	Kotri ...	9,072	65	64	129	14·21
98	Karachi Cantonment ...	6,525	125	103	228	34·94
	Hyderabad District.					
99	Hyderabad ...	72,625	1,655	1,587	3,242	44·64
100	Halla ...	5,757	88	70	158	27·62
101	Matiari ...	4,638	49	20	69	14·87
102	Hyderabad Cantonment ...	3,760	18	14	32	8·51
	Thar and Parkar District.					
103	Umarkot ...	4,199	52	60	112	26·67
104	Mirpurkhas ...	5,765	30	29	59	10·23

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries.	
						Suicide.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Male.	Female.
...	...	...	108	6	69	...	...
...	...	...	108	26	35	...	...
...	...	...	730	12	421	...	...
...	...	...	248	84	36	...	...
...	...	...	286	13	11	...	...
...	...	...	196	1	260	...	...
...	...	...	122	25	105	...	...
...	...	...	296	23	128	...	...
...	3	...	393	4	54	...	...
...	5	...	444	13	5	...	...
...	19	...	3,679	627	5,277	2	1
...	13	...	115	23	98	...	...
...	37	...	536	23	368	1	...
...	...	...	292	31	65	1	...
...	...	...	26	1	10	...	...
...	80	27	1,708	444	2,051	2	...
...	12	...	124	...	4	...	...
...	3	...	128	3	42	...	...
...	...	...	42	4	9	...	...
...	51	...	783	138	1,125	1	...
...	...	...	47	...	6	...	...
...	1	...	113	2	11	1	...
...	...	...	17	...	2	...	...
...	...	...	49	4	32	...	...
...	...	...	76	2	27	...	...

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or accident.	Snakebite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B.—TOWNS—*contd.*						
	Kaira District.						
80	Kaira ...	1	...	...	1	51	255
81	Mehmedabad ...	2	...	...	2	65	236
82	Nadiad ...	28	...	...	28	306	1,497
83	Borsad ...	...	...	...	...	170	533
84	Anand ...	6	...	...	6	23	339
85	Umreth ...	11	...	...	11	135	603
86	Dakore ...	3	...	...	3	82	337
87	Kapadvanj ...	5	...	...	5	84	536
	Panch Mahals District.						
88	Godhra ...	...	...	...	...	368	822
89	Dohad ...	5	...	...	5	55	527
	Ahmedabad District.						
90	Ahmedabad ...	111	3	6	123	4,342	14,067
91	Dhandhuka ...	1	1	...	2	92	348
92	Viramgaon ...	9	3	1	14	78	1,061
93	Dholka ...	3	1	...	5	93	486
94	Ahmedabad Cantonment ...	1	...	...	1	5	43
	Karachi District.						
95	Karachi ...	89	...	...	91	2,364	6,765
96	Tatta ...	...	1	...	1	1	142
97	Kotri ...	2	...	...	2	26	204
98	Karachi Cantonment ...	...	...	...	...	47	102
	Hyderabad District.						
99	Hyderabad ...	32	1	...	34	763	2,894
100	Halla ...	...	...	...	...	7	60
101	Matiari ...	...	...	...	1	15	143
102	Hyderabad Cantonment ...	...	...	...	...	8	27
	Thar and Parkar District.						
103	Umarkot ...	1	1	...	2	53	140
104	Mirpurkhas ...	...	...	...	...	3	108

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
.....	...	...	13·06	·72	8·33	·12	6·16	28·39	22·11
.....	...	...	17·32	4·17	5·61	·33	10·42	37·84	31·39
.....	...	...	22·87	·37	13·19	·88	9·59	46·90	31·15
.....	...	...	20·06	6·94	2·97	...	14·03	44·00	38·96
.....	...	...	25·94	1·18	1·00	·54	2·09	30·75	21·20
.....	...	...	13·98	·07	18·54	·78	9·63	43·00	38·52
.....	...	...	15·27	3·13	13·14	·38	10·26	42·18	34·84
.....	...	...	20·00	1·55	8·66	·34	5·68	36·23	29·28
.....	·11	...	14·57	·14	2·01	...	13·65	30·48	15·04
.....	·31	...	27·63	·81	·31	·31	3·42	32·79	22·25
.....	·07	...	13·59	2·38	19·50	·45	16·04	51·96	37·68
.....	1·61	...	14·28	3·47	12·17	·25	11·42	43·20	27·11
.....	1·41	...	20·42	1·07	14·02	·53	2·97	40·42	26·71
.....	...	...	23·33	2·48	5·20	·40	7·43	38·84	27·66
.....	...	...	14·90	·57	5·73	·57	2·87	24·64	17·50
.....	·40	·13	8·57	2·05	10·80	·41	11·86	33·99	31·29
.....	1·42	...	14·64	·47	...	·11	·11	16·75	13·18
.....	·38	...	14·10	·33	4·62	·22	2·86	22·46	13·68
.....	...	...	6·43	·61	1·37	...	7·20	15·60	13·18
.....	·71	...	10·78	1·89	15·49	·46	10·50	39·84	29·06
.....	...	...	8·17	.....	1·04	...	1·22	10·42	12·85
.....	·22	...	24·36	·43	2·37	·21	3·24	30·83	18·32
.....	...	...	4·52	.....	·53	...	2·12	7·17	7·47
.....	...	...	11·67	·95	7·62	·48	12·64	33·35	22·88
.....	...	...	13·18	·35	4·69	...	·52	18·73	24·80

1	2	3	4 Births.			
No.	Districts and Towns.	Population according to Census of 1921.	Male.	Female.	Total.	Birth-rate.
	B.—TOWNS—*contd.*					
	Nawabshah District.					
105	Nawabshah ...	2,771	35	39	74	26·66
106	Tando Adam ...	12,966	160	102	262	20·20
	Larkana District.					
107	Larkana ...	17,700	402	373	775	43·78
108	Kambar ...	7,613	93	86	179	23·51
109	Ratodero ...	5,565	142	106	248	44·56
110	Sehwan ...	4,428	40	29	69	15·60
	Sukkur District.					
111	Sukkur ...	42,046	748	596	1,344	46·13
112	Shikarpur ...	55,347	1,010	860	1,870	33·79
113	Rohri ...	11,378	180	190	370	31·71
114	Garhi Yasin ...	6,375	148	106	254	39·84
	Upper Sind Frontier District.					
115	Jacobabad ...	10,578	125	85	210	19·85
	Total of Towns ...	3,748,875	56,108	52,003	108,111	28·83
	Total for the Presidency ...	19,165,614	368,823	341,312	710,135	37·05

No. VI—*concld.*

5	6	7	8	9	10	11	
						Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
.....	.....	.....	65	.....	.....	.....	...
.....	1	.....	162	.....	19	.....	...
.....	6	.....	294	8	33	.....	...
.....	14	.....	153	.....	3	.....	...
.....	.....	.....	156	.....	1	.....	...
.....	.....	.....	21	.....	18	.....	...
.....	9	.....	542	10	43	2	2
.....	1	.....	673	20	181	2	...
.....	1	.....	177	14	27	1	...
.....	.....	.....	183	.....	6	.....	...
.....	.....	.....	100	2	5	.....	...
11	1,597	1,188	29,363	7,537	35,546	131	37
73	3,922	9,866	222,466	34,158	103,033	394	251

ANNUAL FORM

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or accident.	Snake-bite or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B.—TOWNS—*concld.*						
	Nawabshah District.						
105	Nawabshah ...	2	...	...	2	5	72
106	Tando Adam ...	1	...	...	1	8	191
	Larkand District.						
107	Larkana ...	4	1	...	5	233	579
108	Kambar ...	1	...	...	1	11	182
109	Ratodero ...	...	...	...	...	2	159
110	Sehwan ...	2	...	...	2	14	55
	Sukkur District.						
111	Sukkur ...	8	1	...	13	111	728
112	Shikarpur ...	18	...	...	20	825	1,720
113	Rohri ...	3	...	...	4	26	249
114	Garhi Yasin ...	...	1	...	1	7	197
	Upper Sind Frontier District.						
115	Jacobabad ...	...	...	...	...	55	162
	Total of Towns ...	1,525	50	45	1,788	39,843	116,873
	Total for the Presidency ...	5,314	1,479	234	7,672	166,069	547,264

No. VI—*concld.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
.....	..	...	23·47	.....	.....	·73	1·80	25·97	18·84
.....	·07	...	12·49	.....	1·47	·07	·61	14·73	10·34
.....	·34	...	16·72	·45	1·86	·28	13·16	32·71	27·79
.....	1·84	...	20·10	.....	·39	·13	1·44	23·90	19·04
.....	...	...	28·03	.....	·16	·18	·36	28·57	24·43
.....	...	...	4·75	.....	4·07	·45	3·16	12·45	22·15
.....	·21	...	12·89	·23	1·02	·30	2·68	17·31	18·83
.....	·02	...	12·16	·36	3·27	·36	14·96	31·07	30·42
.....	·09	...	16·55	1·23	2·38	·35	2·27	21·88	20·56
.....	...	...	28·71	.....	·94	·16	1·09	30·90	24·15
.....	...	...	9·45	·19	·49	...	5·19	15·32	18·62
·00	·43	·32	7·84	2·01	9·50	·48	10·64	31·22	30·27
·00	·20	·51	11·61	1·78	5·38	·40	8·67	28·55	25·36

ANNUAL FORM NO. VI (*a*)—DEATHS *registered from certain during the*

1	2	3	4		5	
			Enteric Fever.		Measles.	
No.	Districts and Towns.	Population according to Census of 1921.	Deaths.	Ratio.	Deaths.	Ratio.
	A.—DISTRICTS (EXCLUDING TOWNS.)					
	Western Registration District.					
1	East Khándesh	918,037	...	...	198	·22
2	West Khándesh	568,809	...	...	64	·11
3	Násik	705,858	...	...	357	·51
4	Thána	694,658	...	...	21	·03
5	Bombay Suburban	91,943	...	...	26	·17
6	Kolaba	533,270	1	...	43	·08
	Central Registration District.					
7	Ahmednagar	667,106	121	·18	119	·18
8	Poona	770,334	119	·15	103	·13
9	Sholápur	574,999	38	·07	92	·16
10	Sátára	964,847	33	·04	384	·40
11	Ratnágiri	1,083,350	80	·07	181	·17
	Southern Registration District.					
12	Belgaum	871,163	183	·21	696	·80
13	Dhárwár	870,565	321	·37	299	·34
14	Bijápur	717,798	331	·42	99	·14
15	Kánara	350,246	258	·74	29	·08
	Gujarat Registration District.					
16	Surat	526,465	...	...	42	·08
17	Broach	243,112	1	...	77	·32
18	Kaira	604,528	...	...	278	·46
19	Panch Mahals	331,791	...	...	150	·45
20	Ahmedabad	568,759	...	...	234	·41
	Sind Registration District.					
21	Karáchi	307,576	30	·09	40	·13
22	Hyderabad	480,469	45	·09	64	·13
23	Thar and Párkar	386,343	22	·06	161	·41
24	Nawábshah	402,915	36	·09	67	·16
25	Lárkana	562,636	15	·02	132	·23
26	Sukkur ... —	394,216	20	·05	64	·16
27	Upper Sind Frontier	230,036	10	·04	42	·18
	Total of Districts ...	15,421,829	1,664	·11	4,062	·26

diseases in the DISTRICTS *and* TOWNS *of the* BOMBAY PRESIDENCY
year 1926

6		7		8		9		10	
Relapsing Fever.		Kala Azar.		Malaria.		Other Fevers.		Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	521	·57	15,787	17·20	3	...
...	...	...	...	398	·70	7,714	13·56	...	...
...	...	...	...	1,724	2·44	9,029	12·79	90	·13
...	...	...	...	1,057	1·52	6,418	9·24	11	·02
...	...	...	...	77	·51	493	3·25	2	·01
...	...	...	...	574	1·08	5,968	11·19	1	...
...	...	...	...	1,809	2·71	2,435	3·65	...	...
...	...	...	...	3,157	4·10	5,296	6·88	...	...
...	...	...	...	173	·30	5,242	9·12	...	...
...	...	...	...	174	·18	10,587	10·97	...	...
...	...	...	...	190	·18	7,210	6·65	...	...
...	...	...	...	1,727	1·98	4,102	4·71	23	·03
...	...	...	...	2,537	2·91	6,379	7·33	25	·03
...	...	...	...	836	1·16	7,340	10·23	22	·03
...	...	...	...	1,292	3·69	2,426	6·93	...	...
...	...	...	...	22	·04	6,557	12·46	...	...
...	...	...	...	2	·01	4,878	20·06	...	...
...	...	...	...	...	...	6,425	10·63	...	...
...	...	...	...	6	·02	5,571	16·79	56	·17
...	...	...	...	91	·16	10,111	17·78	...	...
...	...	...	...	2,817	9·18	382	1·24	...	...
...	...	...	...	5,453	11·34	707	1·47	...	...
...	...	...	...	5,602	14·50	1,835	4·75	...	...
...	...	...	...	5,088	12·62	1,153	2·86	2	·00
...	...	...	...	6,215	11·04	1,987	3·53	...	...
...	...	...	...	5,966	15·13	623	1·58	...	...
...	...	...	...	2,489	10·81	490	2·13	...	...
...	...	...	...	49,997	3·24	137,146	8·89	235	·01

ANNUAL FORM

1	2	11		12		13	
		Pneumonia.		Phthisis.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	A.—DISTRICTS (EXCLUDING TOWNS)—*contd.*						
	Western Registration District.						
1	East Khandesh	57	·06	954	1·04	3,718	4·05
2	West Khandesh	90	·16	412	·72	2,024	3·56
3	Nasik	298	·42	647	·87	3,173	4·49
4	Thana	490	·71	1,016	1·46	879	1·26
5	Bombay Suburban	139	·92	93	·61	167	1·10
6	Kolaba	227	·43	1,621	3·04	873	1·65
	Central Registration District.						
7	Ahmednagar	14	·02	416	·62	3,707	5·56
8	Poona	78	·10	676	·88	3,289	4·27
9	Sholapur	11	·02	288	·50	1,503	2·61
10	Satara	34	·04	655	·68	1,914	1·98
11	Ratnágiri	17	·02	2,732	2·52	2,338	2·16
	Southern Registration District.						
12	Belgaum	55	·06	718	·82	2,535	2·91
13	Dhárwár	10	·01	558	·64	2,001	2·30
14	Bijápur	11	·02	477	·66	1,944	2·71
15	Kánara	54	·15	194	·55	560	1·60
	Gujarat Registration District.						
16	Surat	1,370	2·60	611	1·16	4,368	8·30
17	Broach	410	1·69	304	1·25	2,182	8·97
18	Kaira	322	·58	1,268	2·10	5,772	9·55
19	Panch Mahals	138	·42	247	·74	1,005	3·03
20	Ahmedabad	270	·47	828	1·45	1,767	3·11
	Sind Registration District.						
21	Karáchi	304	·98	92	·29	28	·09
22	Hyderabad	670	1·39	84	·17	71	·14
23	Thar and Párkar	947	2·45	63	·16	97	·25
24	Nawábshah	313	·77	24	·06	23	·06
25	Lárkana	64	·11	34	·06	25	·04
26	Sukkur	48	·12	45	·11	11	·03
27	Upper Sind Frontier	33	·14	6	·03	6	·03
	Total of Districts ...	6,474	·42	15,033	·97	45,963	2·98

No. VI (*a*)—*contd.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
649	·71	2,302	2·51	145	5,895	4,862	10,757	237·07	1
23	·04	755	1·33	26	2,885	2,518	5,403	192·26	2
93	·13	1,519	2·15	166	3,855	3,231	7,086	208·35	3
129	·18	324	·47	302	1,779	1,521	3,300	134·55	4
52	·34	148	·98	23	168	163	331	132·82	5
234	·44	598	1·12	120	1,986	1,642	3,628	159·72	6
228	·34	2,192	3·29	165	3,727	2,935	6,662	195·03	7
26	·03	1,664	2·16	127	3,063	2,396	5,459	182·00	8
4	·01	1,407	2·45	74	2,769	2,233	5,002	186·57	9
10	·01	3,050	3·16	79	4,049	3,251	7,300	174·90	10
688	·63	445	·41	218	2,281	1,861	4,142	93·93	11
247	·28	3,083	3·54	175	3,063	2,454	5,517	142·83	12
121	·14	771	·89	222	3,088	2,404	5,492	164·96	13
397	·55	946	1·32	121	2,633	2,176	4,809	138·42	14
696	1·99	648	1·85	274	1,397	1,181	2,578	210·29	15
197	·37	372	·71	21	2,276	2,163	4,439	197·64	16
29	·12	324	1·33	24	1,626	1,476	3,102	254·37	17
450	·74	674	1·12	34	2,356	2,115	4,471	198·13	18
46	·14	413	1·24	85	1,240	1,091	2,331	175·11	19
186	·33	288	·51	9	2,138	1,819	3,957	175·66	20
5	·02	14	·05	69	505	411	916	187·80	21
15	·03	12	·02	115	704	583	1,287	194·06	22
38	·08	61	·05	142	898	834	1,732	163·63	23
9	·02	9	·02	154	794	749	1,543	147·05	24
4	·007	4	·007	141	1,034	909	1,943	154·95	25
6	·01	17	·04	81	1,036	847	1,883	183·90	26
4	·02	...	...	23	344	305	649	139·27	27
4,580	·30	22,041	1·43	3,125	57,589	48,130	105,719	175·61	

ANNUAL FORM

1	2	3	4		5	
No.	Districts and Towns.	Population according to Census of 1921.	Enteric Fever.		Measles.	
			Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS.					
	East Khandesh District.					
1	Jalgaon	23,696	...	...	3	·12
2	Bhusáwal	24,933	...	...	6	·24
3	Chopda	16,930	...	...	9	·53
4	Dharangaon	14,824	...	...	9	·61
5	Parola	12,079	...	...	8	·66
6	Amálner	17,068	...	...	...	...
7	Erandol	12,489	...	...	6	·48
8	Nasirabad	12,188	...	...	...	...
9	Chálísgaon	11,990	...	...	7	·58
10	Yawal	10,888	...	...	...	...
	West Khandesh District.					
11	Dhulia	30,061	...	...	17	·56
12	Nandurbar	13,842	...	...	1	·07
	Nasik District.					
13	Násik	42,715	...	...	76	1·78
14	Yeola	13,911	...	...	4	·29
15	Málegaon	23,711	...	...	71	2·99
16	Igatpuri	9,977	...	...	...	...
17	Manmad	11,866	...	...	6	·51
18	Trimbak	4,538	...	...	...	...
19	Deolali Cantonment	12,640	...	...	...	...
	Thana District.					
20	Thána	22,116	...	...	2	·09
21	Bhiwandi	12,188	...	...	4	·33
22	Kalyán	17,573	...	...	...	...
23	Bassein	10,364	...	...	...	...
	Bombay Suburban District.					
24	Bandra	28,738	2	·07	4	·14
25	Kurla	26,959	...	...	8	·31
26	Santa Cruz Cantonment	4,701	...	...	...	...
	Kolaba District.					
27	Alibág	5,263	...	...	6	1·14
28	Panvel	8,622	...	...	...	...
29	Mahád	7,192	...	...	...	...

No. VI (*a*)—*contd.*

6		7		8		9		10	
Relapsing Fever.		Kala Azar.		Malaria.		Other Fevers.		Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	2	·08	149	6·29	...	...
...	...	...	...	2	·08	301	12·07	...	...
...	...	...	...	...	...	111	6·85	...	...
...	...	...	...	...	...	103	6·95	...	...
...	...	...	...	...	...	114	9·43	...	...
...	...	...	...	...	...	109	6·39	...	...
...	...	...	...	...	...	106	8·48	...	...
...	...	...	...	6	·41	134	10·99	...	...
...	...	...	...	15	1·25	156	13·01	...	...
...	...	...	...	5	·46	86	3·30	2	·18
...	...	...	...	1	·03	112	3·73	...	...
...	...	...	...	...	...	182	13·15	...	...
...	...	...	...	67	1·57	92	2·15	...	...
...	...	...	...	...	...	321	23·08	...	...
...	...	...	...	39	1·69	113	4·76	...	...
...	...	...	...	...	...	113	11·33	...	...
...	...	...	...	...	...	47	3·96	...	...
...	...	...	...	...	...	31	6·84	...	...
...	...	...	...	1	·08	...	...	...	...
...	...	...	...	...	...	167	7·55	...	...
...	...	...	...	20	1·64	80	6·56	...	...
...	...	...	...	6	·34	56	3·18	1	·06
...	...	...	...	6	·58	38	3·67	...	...
...	...	...	...	20	·70	25	·87	...	...
...	...	...	...	20	·77	234	8·98	...	...
...	...	...	...	...	...	1	·21	...	...
...	...	...	...	1	·19	51	9·74	...	...
...	...	...	...	24	2·80	7	·81	...	...
...	...	...	...	9	1·25	38	5·28	...	...

ANNUAL FORM

1	2	11		12		13	
		Pneumonia.		Phthisis.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*contd.*						
	East Khandesh District—contd.						
1	Jalgaon	8	·34	33	1·39	80	3·38
2	Bhusáwal	11	·44	13	·52	41	1·65
3	Chopda	...	...	12	·71	36	2·13
4	Dharangaon	...	...	92	6·21	9	·61
5	Parola	...	...	10	·83	40	3·32
6	Amálner	6	·35	24	1·40	32	1·87
7	Erandol	1	·08	31	2·4[illegible]	60	4·80
8	Nasirabad	...	...	4	33	100	8·20
9	Chálisgaon	2	·17	29	2·42	32	2·67
10	Yawal	...	...	2	·18	40	3·67
	West Khandesh District.						
11	Dhulia	53	1·76	47	1·56	98	3·26
12	Nandurbar	1	·07	6	·43	57	4·13
	Nasik District.						
13	Násik	234	5·48	135	3·16	149	3 49
14	Yeola	3	·22	29	2·08	86	6·18
15	Málegaon	18	·76	15	·63	85	3·59
16	Igatpuri	3	·30	7	·70	32	3·21
17	Manmad	...	...	7	·59	37	3·11
18	Trimbak	...	...	2	·45	22	4·85
19	Deolali Cantonment	23	1·82	...	...	2	·16
	Thana District.						
20	Thána	40	1·81	45	2·04	60	2·71
21	Bhiwandi	19	1·56	54	4·43	30	2·46
22	Kalyán	23	1·31	45	2·56	71	4·04
23	Bassein	10	0·96	21	2·04	16	1·54
	Bombay Suburban District.						
24	Bandra	41	1·43	26	·90	26	·90
25	Kurla	28	1·07	1	·03	96	3·68
26	Santa Cruz Cantonment	...	...	...	...	1	·21
	Kolaba District.						
27	Alibág	4	·76	15	2·86	5	·97
28	Panvel	9	1·04	18	2·09	16	1·85
29	Mahád	15	2·09	13	1·81	4	·55

No. VI (*a*)—*contd.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
26	1·10	51	2·15	12	80	62	142	233·55	1
2	·08	44	1·76	6	103	74	177	283·20	2
...	...	19	1·12	5	33	27	60	132·16	3
6	·40	52	3·51	5	81	57	138	298·62	4
4	·33	30	2·50	4	63	53	116	271·66	5
6	·35	15	·88	1	38	21	59	178·79	6
35	2·80	12	·96	4	82	56	138	274·35	7
25	2·05	30	2·46	4	99	72	171	254·74	8
14	1·17	20	1·67	1	68	46	114	237·99	9
3	·28	13	1·20	5	21	11	32	113·47	10
2	·06	82	2·73	...	109	104	213	212·57	11
...	...	15	1·08	...	51	45	96	199·58	12
35	·82	71	1·66	18	238	168	406	342·33	13
...	...	7	·50	...	83	52	135	353·40	14
1	·04	99	4·18	2	94	48	142	210·37	15
...	...	11	1·10	7	21	21	42	232·04	16
...	...	9	·76	2	22	10	32	148·83	17
1	·23	2	·45	1	12	11	23	146·49	18
...	...	3	·23	...	4	12	16	761·90	19
5	·23	18	·81	7	35	27	62	177·14	20
6	·49	46	3·78	12	36	28	64	165·37	21
7	·40	20	1·14	12	42	36	78	142·60	22
5	·48	9	·87	5	29	25	54	215·14	23
13	·45	13	·45	3	74	60	134	221·43	24
62	2·38	22	·85	15	100	98	198	332·24	25
2	·43	...	...	...	1	1	2	250·00	26
2	·38	3	·57	...	19	6	25	213·67	27
2	·23	3	·34	3	7	5	12	86·33	28
2	·28	...	...	...	9	10	19	136·69	29

1	2	3	4		5	
No.	Districts and Towns.	Population according to Census of 1921.	Enteric Fever.		Measles.	
			Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*contd.*					
	Kolaba District—concld.					
30	Uran	8,135	...	...	...	...
31	City of Bombay	1,148,815	124	·11	134	·12
	Ahmednagar District.					
32	Ahmednagar	33,138	3	·09	6	·18
33	Sangamner	12,737	...	...	...	...
34	Ahmednagar Cantonment	10,997	...	...	1	·09
	Poona District.					
35	Poona City	133,122	89	·67	111	·84
36	Poona Suburban	13,971	...	...	2	·14
37	Baramati	11,905	...	...	10	·84
38	Khed	7,013	...	...	...	...
39	Lonávla	10,471	...	...	2	·19
40	Junnar	7,376	...	...	4	·54
41	Poona Cantonment	25,498	...	...	...	...
42	Kirkee do.	7,991	...	...	...	...
	Sholapur District.					
43	Sholápur	119,347	1	·01	19	·16
44	Bársi	22,074	2	·09	40	1·81
45	Pandharpur	25,210	3	·12	24	·95
	Satara District.					
46	Sátára	22,454	2	·09	17	·76
47	Wái	10,208	7	·68	1	·10
48	Karád	11,255	3	·26	12	1·07
49	Ashta	9,016	...	...	...	...
50	Islámpur	7,915	...	...	...	...
	Ratnagiri District.					
51	Ratnágiri	18,286	2	·11	1	·06
52	Vengurla	19,126	5	·26	2	·11
53	Málwan	22,213	1	·04	2	·09
54	Chiplun	11,005	2	·18	4	·37
	Belgaum District.					
55	Belgaum	36,214	12	·33	1	·03
56	Gokák	9,989	6	·60	23	2·30
57	Athni	13,538	...	...	15	1·11
58	Nipáni	11,878	1	·08	11	·93
59	Belgaum Cantonment	6,880	3	·44	...	...

No. VI (*a*)—*contd.*

6 Relapsing Fever.		7 Kala Azar.		8 Malaria.		9 Other Fevers.		10 Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	...	...	27	3·33	...	...
...	...	2	·00	598	·52	2,206	1·92	87	·07
...	...	...	...	29	·88	12	·36	...	...
...	...	...	...	15	1·18	32	2·51	...	...
...	...	...	...	...	...	61	5·55	1	·09
...	...	...	...	131	·98	801	6·02	...	...
...	...	...	...	37	2·65	108	7·73	...	...
...	...	...	...	5	·42	125	10·50	...	...
...	...	...	...	1	·14	37	5·28	...	...
...	...	...	...	108	10·31	43	4·11	...	...
...	...	...	...	22	2·98	11	1·49	...	...
...	...	...	...	3	·11	62	2·43	...	...
...	...	...	...	3	·38	...	...	...	...
...	...	...	...	1	·01	1,852	15·52	...	...
...	...	...	...	...	...	325	14·72	...	...
...	...	...	...	12	·48	241	9·56	...	...
...	...	...	...	2	·09	126	5·61	...	...
...	...	...	...	2	·20	24	2·35	...	...
...	...	...	...	...	...	26	2·31	...	...
...	...	...	...	...	...	56	6·21	...	...
...	...	...	...	2	·25	37	4·67	...	...
...	...	...	...	5	·27	78	4·27	...	...
...	...	...	...	15	·78	75	3·92	...	...
...	...	...	...	3	·14	86	3·87	...	...
...	...	...	...	...	...	106	9·63	...	...
...	...	...	...	26	·72	147	4·06	1	·03
...	...	...	...	3	·36	32	3·20	...	...
...	...	...	...	13	·96	84	6·20	...	...
...	...	...	...	1	·08	88	7·41	...	...
...	...	...	...	...	...	29	4·22	...	...

ANNUAL FORM

1	2	11		12		13	
		Pneumonia.		Phthisis.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*contd.*						
	Kolába District—concld.						
30	Uran	1	·12	11	1·35	9	1·11
31	City of Bombay	8,539	7·43	1,539	1·34	3,310	2·88
	Ahmednagar District.						
32	Ahmednagar	10	·30	68	2·06	139	4·20
33	Sangamner	...	...	13	1·02	34	2·67
34	Ahmednagar Cantonment	18	1·64	8	·73	41	3·73
	Poona District.						
35	Poona City	1,213	9·12	495	3·71	311	2·34
36	Poona Suburban	29	2·08	12	·86	48	3·43
37	Baramati	2	·17	11	·92	20	1·68
38	Khed	...	...	3	·43	54	7·70
39	Lonávla	15	1·43	7	·67	56	5·35
40	Junnar	...	...	10	1·36	50	6·78
41	Poona Cantonment	6	·24	30	1·18	69	2·70
42	Kirkee do.	74	9·26	30	3·75	42	5·26
	Sholapur District.						
43	Sholapur	45	·38	145	1·21	370	3·10
44	Bársi	...	...	7	·32	51	2·31
45	Pandharpur	39	1·55	79	3·13	171	6·78
	Satara District.						
46	Sátára	11	·49	58	2·58	48	2·13
47	Wái	1	·10	21	2·06	15	1·47
48	Karád	3	·26	2	·18	14	1·24
49	Ashta	...	...	4	·44	12	1·33
50	Islámpur	...	...	5	·63	55	6·95
	Ratnagiri District.						
51	Ratnágiri	11	·60	50	2·73	13	·71
52	Vengurla	18	·94	41	2·14	27	1·41
53	Málwan	4	·18	51	2·30	33	1·49
54	Chiplun	2	·18	33	3·00	10	·91
	Belgaum District.						
55	Belgaum	34	·94	93	2·57	45	1·24
56	Gokák	1	·10	23	2·30	25	2·50
57	Athni	...	...	19	1·40	45	3·32
58	Nipáni	...	...	17	1·43	65	5·47
59	Belgaum Cantonment	2	·29	2	·29	12	1·74

No. VI (*a*)—*contd.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
4	·49	4	·49	3	13	12	25	323·21	30
693	·60	1,596	1·39	143	4,331	3,822	8,153	393·79	31
4	·12	33	1·00	19	68	46	114	148·82	32
4	·31	15	1·18	5	27	29	56	131·76	33
6	·54	6	·54	...	22	22	44	158·27	34
40	·30	433	3·25	82	1,054	825	1,879	732·55	35
...	...	45	3·22	...	55	33	88	322·34	36
...	...	43	3·61	...	50	42	92	216·47	37
...	...	6	·86	3	4	11	15	94·94	38
...	...	26	2·48	...	49	37	86	355·37	39
...	...	8	1·08	3	10	12	22	120·22	40
5	·20	19	·25	9	15	15	30	263·16	41
5	·63	33	4·12	...	31	30	61	535·09	42
2	·02	190	1·59	28	604	543	1,147	225·94	43
...	...	43	1·95	...	169	119	281	319·32	44
5	·20	108	4·28	17	254	204	458	515·19	45
...	...	28	1·25	3	74	49	123	278·91	46
1	·10	15	1·47	3	9	16	25	86·21	47
...	...	10	·89	1	11	13	24	109·09	48
...	...	54	5·99	...	18	24	42	130·44	49
...	...	33	4·17	1	10	11	21	96·33	50
5	·27	3	·16	1	17	14	31	65·13	51
9	·47	12	·63	2	44	41	85	111·99	52
32	1·44	1	·04	2	38	28	66	97·78	53
3	·27	4	·37	3	10	9	19	55·23	54
6	·18	33	·91	1	90	67	157	148·39	55
8	·80	40	4·00	...	24	29	53	146·41	56
4	·29	5	·37	...	20	12	32	103·23	57
...	...	30	2·52	1	50	42	92	202·64	58
3	·44	3	·44	2	8	9	17	232·88	59

ANNUAL FORM

1	2	3	4		5	
No.	Districts and Towns.	Population according to Census of 1921.	Enteric Fever.		Measles.	
			Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*contd.*					
	Dharwar District.					
60	Dhárwár	34,327	68	1·98	20	·58
61	Hubli	69,140	10	·14	34	·49
62	Gadag-Bettigeri	41,158	14	·34	24	·58
63	Ránebennur	13,930	3	·21	19	1·36
64	Nawalgund	7,089	...	...	...	...
	Bijapur District.					
65	Bijápur	32,471	29	·89	5	·15
66	Bágalkot	19,471	7	·36	...	...
67	Guledgud	14,760	1	·07	...	...
68	Ilkal	11,856	5	·42	...	...
	Kanara District.					
69	Kárwár	14,463	8	·55	2	·14
70	Kumta	14,291	2	·14	...	...
71	Gokarn	8,307	...	...	...	...
72	Honáwar	7,035	3	·43	...	...
73	Bhatkal	7,134	...	...	3	·42
	Surat District.					
74	Surat	117,428	26	·22	286	2·43
75	Bulsar	19,681	4	·20	16	·81
76	Ránder	10,547	...	...	...	...
	Broach District.					
77	Broach	42,626	...	...	42	·99
78	Jambusar	10,217	...	...	...	...
79	Ankleshwar	11,756	...	...	16	1·36
	Kaira District.					
80	Kaira	8,277	...	...	...	...
81	Mehmedabad	6,236	...	...	13	2·09
82	Nadiád	31,919	...	...	4	·13
83	Borsad	12,113	...	...	...	...
84	Anand	11,024	...	...	...	...
85	Umreth	14,024	...	...	...	...
86	Dákore	7,990	...	...	12	1·50
87	Kapadvanj	14,794	...	...	71	4·80

No. VI (*a*)—*contd.*

6 Relapsing Fever.		7 Kala Azar.		8 Malaria.		9 Other Fevers.		10 Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	20	·58	137	3·99	2	·06
...	...	...	...	30	·43	322	4·66	...	...
...	...	...	...	9	·22	339	8·24	5	·12
...	...	...	...	8	·57	22	1·58	...	...
...	...	...	...	2	·23	17	2·40	...	...
...	...	...	...	90	2·77	21	·65	...	...
...	...	...	...	7	·36	196	10·07	...	...
...	...	...	...	...	...	147	9·96	...	...
...	...	...	...	14	1·18	27	2·28	...	...
...	...	...	...	27	1·87	3	·21	...	...
...	...	...	...	5	·35	48	3·36	...	...
...	...	...	...	4	·48	22	2·65	...	...
..	...	...	...	1	·14	36	5·12	...	...
...	...	...	...	...	...	52	7·29	...	...
...	...	...	...	492	4·19	74	·63	9	·08
...	...	...	...	...	...	18	·92	...	...
...	...	...	...	...	...	123	11·66	...	...
...	...	...	...	24	·56	414	9·71	...	...
...	...	...	...	196	19·19	5	·49	...	...
...	...	...	...	...	...	266	22·63	...	...
...	...	...	..	...	...	108	13·06	...	...
...	...	...	...	...	...	95	15·23	...	...
...	...	...	...	...	...	726	22·74	...	...
...	...	...	...	...	...	243	20·06	...	...
...	...	...	...	...	...	286	25·94	...	...
...	...	...	...	196	13·98	...	...	...	...
...	...	...	...	19	2·38	91	11·39	...	...
...	...	...	...	...	...	225	15·20	...	...

ANNUAL FORM

1	2	11		12		13	
		Pneumonia.		Phthisis.		Other Respiratory diseases.	
No.	Districts and Towns	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*contd.*						
	Dharwar District.						
60	Dhárwár	14	·41	50	1·46	137	3·99
61	Hubli	7	·10	159	2·30	234	3·38
62	Gadag-Bettigeri	7	·17	95	2·31	208	5·05
63	Ranebennur	...	...	31	2·23	41	2·94
64	Nawalgund	...	...	25	3·53	8	1·13
	Bijapur District.						
65	Bijápur	13	·40	45	1·38	74	2·28
66	Bágalkot	1	·05	29	1·49	68	3·49
67	Guledgud	...	...	27	1·83	78	5·28
68	Ilkal	2	·17	37	3·12	31	2·61
	Kanara District.						
69	Kárwar	1	·07	20	1·38	5	·35
70	Kumta	1	·07	8	·56	24	1·68
71	Gokarn	15	1·81	15	1·81	2	·24
72	Honáwar	...	...	4	·57	3	·43
73	Bhatkal	...	...	9	1·26	6	·84
	Surat District.						
74	Surat	689	5·86	351	2·99	574	4·89
75	Bulsar	184	9·35	18	·92	16	·81
76	Ránder	6	·57	63	5·97	5	·47
	Broach District.						
77	Broach	27	·63	66	1·55	404	9·48
78	Jambusar	12	1·17	4	·39	149	14·58
79	Ankleshwar	5	·42	17	1·45	25	2·13
	Kaira District.						
80	Kaira	...	...	5	0·60	64	7·73
81	Mohmedabad	4	·64	12	1·92	19	3·05
82	Nadiád	313	9·81	61	1·91	47	1·47
83	Borsad	2	·16	...	...	34	2·81
84	Anand	3	·27	...	...	8	·73
85	Umreth	...	...	2	·14	258	18·40
86	Dakore	15	1·88	8	1·00	82	10·26
87	Kapadvanj	6	·41	39	2·64	83	5·61

No. VI (*a*)—*contd.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total		
6	·17	96	2·80	5	58	39	97	97·19	60
1	·01	30	·43	9	118	85	203	103·20	61
5	·12	35	·85	6	175	147	322	198·15	62
...	...	15	1·08	5	54	34	88	151·72	63
...	...	5	·71	...	19	6	25	126 90	64
62	1·91	4	·12	...	75	61	136	127·22	65
21	1·08	30	1·54	1	99	69	168	213·20	66
4	·27	2	·14	5	84	64	148	214·49	67
...	...	1	·08	...	54	55	109	338·51	68
4	·28	3	·21	2	21	14	35	87·50	69
92	6·44	17	1·19	6	19	15	34	108·28	70
36	4·33	1	·12	3	12	14	26	94·89	71
73	10·38	13	1·85	1	21	14	35	164·32	72
31	4·35	7	·98	3	10	12	22	101·38	73
169	1·44	411	3·50	82	1,042	948	1,990	452·89	74
7	·36	4	·20	13	50	84	84	138·84	75
2	·19	9	·85	2	37	36	73	304·17	76
13	·30	42	·99	2	178	157	335	187·67	77
6	·59	4	·39	...	76	65	141	256·83	78
...	...	...	...	1	77	64	141	265·04	79
1	·12	5	·60	...	24	22	46	166·67	80
8	1·28	18	2·89	...	34	21	55	214·01	81
11	·34	1	·03	16	202	205	407	334·15	82
34	2·81	50	4·13	...	113	88	201	297·34	83
2	·18	11	1·00	...	43	37	80	260·59	84
1	·07	...	...	...	95	97	193	286·52	85
5	·63	20	2·50	1	46	54	100	349·65	86
2	·13	21	1·42	1	83	71	154	252·05	87

ANNUAL FORM

1	2	3	4		5	
No.	Districts and Towns.	Population according to Census of 1921.	Enteric Fever.		Measles.	
			Deaths.	Ratio.	Deaths	Ratio.
	B.—TOWNS—*contd.*					
	Panch Mahals District.					
88	Godhra	26,069	...	...	...	...
89	Dohad	16,071	...	...	76	4·73
	Ahmedabad District.					
90	Ahmedabad	270,500	...	...	774	2·86
91	Dhandhuka	8,056	...	...	12	1·49
92	Viramgaon	26,252	...	...	57	2·17
93	Dholka ...	12,513	...	...	64	5·11
94	Ahmedabad Cantonment	1,745	...	...	...	...
	Karachi District.					
95	Karáchi	199,014	44	·22	316	1·57
96	Tatta	8,470	...	...	1	·12
97	Kotri	9,072	...	...	15	1·65
98	Karáchi Cantonment	6,525	...	...	...	...
	Hyderabad District.					
99	Hyderabad	72,625	98	·35	237	3·27
100	Halla	5,757	...	...	2	·35
101	Matiari	4,638	...	...	11	2·37
102	Hyderabad Cantonment	3,760	...	...	...	...
	Thar and Parkar District.					
103	Umarkot	4,199	...	...	1	·24
104	Mirpurkhas	5,765	...	...	6	1·04
	Nawabshah District.					
105	Nawábsháh	2,771	...	...	...	...
106	Tando Adam	12,966	...	...	3	·23
	Larkana District.					
107	Lárkána	17,700	3	·17	33	1·86
108	Kambar	7,613	...	...	17	2·23
109	Ratodero	5,565	...	...	...	...
110	Sehwan	4,423	...	...	...	...

No. VI (*a*)—*contd.*

6 Relapsing Fever.		7 Kala Azar.		8 Malaria.		9 Other Fevers.		10 Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	...	...	393	14·57	...	...
...	...	...	...	...	...	368	22·90	...	...
...	...	...	...	...	...	2,904	10·73	1	...
...	...	...	...	...	...	103	12·79	...	...
...	...	...	...	...	...	479	18·25	...	...
...	...	...	...	...	...	228	18·22	...	...
...	...	...	...	...	...	26	14·90	...	...
...	...	...	...	32	·16	1,306	6·56	9	·06
...	...	...	...	103	12·16	20	2·36	...	...
...	...	...	...	111	12·23	2	·22	...	...
...	...	...	...	5	·76	37	5·67	...	...
...	...	...	...	381	5·24	58	·79	9	·12
...	...	...	...	40	6·95	5	·87	...	...
...	...	...	...	89	19·19	13	2·80	...	...
...	...	...	...	...	...	17	4·52	...	...
...	...	...	...	47	11·19	1	·24	...	...
...	...	...	...	70	12·14	...	...	...	...
...	...	...	...	38	13·72	27	9·75	...	...
...	...	...	...	129	9·95	30	2·31	...	...
...	...	...	...	258	14·69	...	...	...	...
...	...	...	...	40	5·26	96	12·61	...	...
...	...	...	...	74	13·30	82	14·73	...	...
...	...	...	...	21	4·75	...	...	...	...

ANNUAL FORM

1	2	11		12		13	
		Pneumonia.		Phthisis.		Other Respiratory Diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*continued.*						
	Panch Mahals District.						
88	Godhra	4	·15	85	1·30	15	·56
89	Dohad	...	...	...	...	5	·31
	Ahmedabad District.						
90	Ahmedabad	294	1·09	1,132	4·18	3,851	14·23
91	Dhandhuka	2	·25	18	2·24	78	9·68
92	Viramgaon	20	·76	59	2·25	289	11·01
93	Dholka	2	·16	17	1·36	46	3·68
94	Ahmedabad Cantonment	...	...	3	1·72	7	4·01
	Karachi District.						
95	Karachi	899	4·52	456	2·29	696	3·49
96	Tatta	2	·23	...	...	2	·03
97	Kotri	28	3·08	13	1·43	1	·11
98	Karachi Cantonment	9	1·37	...	...	...	...
	Hyderabad District.						
99	Hydorabad	723	9·95	224	3·08	178	2·46
100	Halla	3	·52	2	·35	1	·17
101	Matiari	...	...	9	1·94	2	·43
102	Hyderabad Cantonment	2	·53	...	...	...	...
	Thar and Parkar District.						
103	Umarkot	22	5·24	9	2·14	1	·24
104	Mirpurkhas	19	3·30	6	1·04	2	·35
	Nawábshah District.						
105	Nawábsháh	...	...	...	...	...	...
106	Tando Adam	13	1·01	5	·39	1	·07
	Larkana District.						
107	Lárkána	21	1·18	4	·23	8	·45
108	Kambar	2	·26	1	·13	...	...
109	Ratodero	...	...	1	·18	...	...
110	Sehwan	13	2·94	5	1·13	...	...

No. VI (*a*)—*contd.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
1	·03	3	·11	7	159	141	300	240·38	88
12	·75	1	·06	1	92	77	169	297·53	89
235	·87	392	1·46	237	2,676	2,356	5,032	437·76	90
8	·93	20	2·48	...	50	41	91	250·69	91
13	·50	15	·57	25	163	170	333	399·76	92
...	...	31	2·48	...	86	75	161	247·69	93
...	...	1	·57	...	2	3	5	179·41	94
86	·48	408	2·05	111	1,244	1,142	2,386	252·70	95
...	...	...	...	1	10	15	25	157·23	96
1	·11	2	·22	12	23	32	55	426·36	97
	...	4	·61	...	9	17	26	114·03	98
57	·78	81	1·11	36	486	442	928	286·24	99
...	...	...	...	5	13	10	23	135·57	100
...	...	2	·43	2	13	16	29	420·29	101
...	...	...	...	...	4	...	4	125·00	102
3	·71	1	·24	9	17	16	33	294·36	103
1	·17	1	·17	2	7	9	16	271·19	104
...	...	...	...	5	7	8	15	202·70	105
...	...	...	...	7	15	19	34	125·95	106
5	·28	3	·17	26	95	70	165	212·90	107
...	...	...	...	9	25	17	42	234·63	108
...	...	...	...	2	31	24	55	221·77	109
...	...	...	...	6	3	4	7	101·45	110

ANNUAL FORM

1	2	3	4		5	
No.	Districts and Towns.	Population according to Census of 1921.	Enteric Fever.		Measles.	
			Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*concld.*					
	Sukkur District.					
111	Sukkur	42,046	...	...	22	·50
112	Shikárpur	55,347	15	·27	138	2·49
113	Rohri	11,378	...	...	...	...
114	Garhi Yasin	6,375	4	·62	43	6·75
	Upper Sind Frontier.					
115	Jacobabad	10,578	...	...	...	...
	Total of Towns ...	3,743,785	612	·16	3,084	·82
	Total for the Presidency ...	19,165,614	2,276	·12	7,146	·37

No. VI (*a*)—*concld.*

6 Relapsing Fever.		7 Kala Azar.		8 Malaria.		9 Other Fevers.		10 Influenza.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	...	...	520	12·38	...	...
...	...	...	...	66	1·49	454	8·22	...	...
...	...	...	...	177	15·55	...	...	...	...
...	...	...	...	332	17·57	24	3·77	...	...
...	...	...	...	10	·95	90	8·50	...	...
...	...	2	...	4,227	1·13	21,310	5·69	127	·03
...	...	2	...	54,224	2·83	158,456	8·27	362	·02

ANNUAL FORM

1	2	11		12		13	
		Pneumonia		Phthisis.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B.—TOWNS—*concluded.*						
	Sukkur District.						
111	Sukkur	33	·79	7	·16	3	·06
112	Shikárpur	88	1·49	23	·42	75	1·35
113	Rohri	23	2·03	4	·35	...	...
114	Garhi Yasin	1	·16	3	·47	2	·31
	Upper Sind Frontier.						
115	Jacobabad	5	·49	...	...	...	...
	Total of Towns ...	14,180	3·79	6,859	1·83	14,507	3·87
	Total for the Presidency ...	20,654	1·08	21,892	1·14	60,492	3·15

No. VI (*a*)—*concld.*

14		15		16	17			18	19
Dysentery.		Diarrhœa.		Deaths from child birth.	Deaths under 1 year.			Infant mortality rate per 1,000 births.	No.
Deaths.	Ratio.	Deaths.	Ratio.		Male.	Female.	Total.		
4	·09	6	·14	26	141	97	238	177·08	111
4	·07	16	·29	60	245	218	463	247·68	112
...	...	14	1·23	16	37	48	85	229·73	113
...	...	...	...	7	31	29	60	196·85	114
2	·19	...	...	25	21	17	38	180·95	115
2,083	·56	5,454	1·46	1,267	17,441	15,053	32,494	300·56	
6,653	·35	27,495	1·43	4,392	75,030	63,183	138,213	194·63	

ANNUAL FORM No. VII.—DEATHS *registered from* CHOLERA *in the*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from cholera were reported.	Number in each District.	Number from which deaths from cholera were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District.										
1	East Khándesh ...	23	4	1,478	6	...	...	1	...	...	...
2	West Khándesh ...	10	1	1,242	1	...	...	...	...	...	...
3	Násik	19	2	1,667	3	...	...	...	...	...	3
4	Thána	15	...	1,546	...	...	...	...	...	...	...
5	Bombay Suburban ...	5	...	86	...	...	...	...	...	...	...
6	Kolába	13	1	1,482	1	...	...	...	...	...	...
7	Bombay City ...	1	1	1	1	...	...	...	...	...	1
	Central Registration District.										
8	Ahmednagar... ...	15	2	1,346	2	...	...	2	...	...	...
9	Poona	20	3	1,157	3	...	...	...	...	...	...
10	Sholápur	10	2	718	3	...	...	1	...	...	...
11	Sátára	19	3	1,342	3	...	...	...	...	..	1
12	Ratnágiri	15	1	1,305	1	...	...	...	...	...	...
	Southern Registration District.										
13	Belgaum	15	2	1,069	2	...	...	...	1	...	1
14	Dhárwár	18	...	1,277	...	...	...	...	...	...	...
15	Bijápur	13	1	1,128	1	...	...	...	...	1	...
16	Kánara	16	1	1,264	1	...	...	...	...	2	...
	Gujarat Registration District.										
17	Surat	12	1	782	1	...	2	...	...	...	...
18	Broach	9	...	404	...	...	...	...	...	...	...
19	Kaira	15	1	579	1	...	...	...	...	1	...
20	Panch Mahals ...	7	...	668	...	...	...	...	...	...	...
21	Ahmedabad	13	...	871	...	...	...	...	...	...	...
	Sind Registration District.										
22	Karáchi	16	...	793	...	...	...	...	...	...	...
23	Hyderabad	11	...	862	...	...	...	...	...	...	...
24	Thar and Párkar ...	13	...	904	...	...	...	...	...	...	...
25	Nawábsháh	9	...	731	...	...	...	...	...	..	...
26	Lárkána	15	...	763	...	...	...	...	...	...	...
27	Sukkur...	12	1	671	1	...	...	...	...	...	...
28	Upper Sind Frontier.	6	...	410	...	...	...	...	...	...	...
	Total for the Presidency.	365	27	26,546	31	...	2	4	1	4	6

DISTRICTS *of the* BOMBAY PRESIDENCY *during each month of the year 1926*

July.	August.	September.	October.	November.	December.	6 TOTAL. Male.	Female.	Total.	7 RATIO OF DEATHS PER 1,000 OF POPULATION. Male.	Female.	Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
...	4	...	3	24	7	17	19	36	·03	·03	·03	·58	1
1	...	...	...	...	...	...	1	1	...	·00	·00	·24	2
...	1	...	...	...	...	4	1	5	·01	·00	·01	·37	3
...	...	...	...	...	...	...	...	...	...	...	...	·05	4
...	...	...	...	...	...	...	...	...	...	...	...	·07	5
...	...	...	...	...	1	1	...	1	·00	...	·00	·07	6
2	1	...	1	...	...	4	1	5	·00	·00	·00	·05	7
...	...	...	...	1	...	1	2	3	·00	·00	·00	·71	8
2	1	...	...	...	...	2	1	3	·00	·00	·00	·48	9
5	...	...	...	...	...	4	2	6	·01	·01	·01	·69	10
1	...	...	...	...	1	1	2	3	·00	·00	·00	·35	11
...	...	...	1	...	...	1	...	1	·00	...	·00	·02	12
...	...	...	...	...	...	1	1	2	·00	·00	·00	·16	13
...	...	...	...	...	...	...	...	...	...	...	...	·56	14
...	...	...	...	...	...	1	...	1	·00	...	·00	·77	15
...	...	...	...	...	...	1	1	2	·00	·00	·00	·02	16
...	...	...	...	...	...	2	...	2	·00	...	·00	·00	17
...	...	...	...	...	...	...	...	...	...	...	...	·00	18
...	...	...	...	...	...	...	1	1	...	·00	·00	·01	19
...	...	...	...	...	...	...	...	...	...	...	...	·08	20
...	...	...	...	...	...	...	...	...	...	...	...	·01	21
...	...	...	...	...	...	...	..	...	...	...	...	·09	22
...	...	...	...	...	...	...	...	...	..	...	...	·02	23
...	...	...	...	...	...	...	...	...	...	...	...	...	24
...	...	...	...	...	...	...	...	...	...	...	...	·05	25
...	...	...	...	...	...	...	...	...	...	...	...	·03	26
...	1	...	...	...	...	...	...	...	...	...	...	...	27
...	...	...	...	...	...	1	...	1	·00	...	·01	...	28
12	5	...	5	25	9	41	32	73	·00	·00	·00	·25	

ANNUAL FORM No. VIII.—DEATHS *registered from* SMALL-POX *in the*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from Small-pox were reported.	Number in each District.	Number from which deaths from Small-pox were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District										
1	East Khándesh ...	23	14	1,478	73	31	17	48	47	31	30
2	West Khándesh ...	19	4	1,242	4	...	4	...	8	...	...
3	Násik	19	9	1,667	21	8	8	13	8	22	21
4	Thána	15	9	1,546	21	8	7	15	9	18	14
5	Bombay Suburban ...	5	3	86	7	2	4	1	3	1	3
6	Kolába	13	5	1,482	19	7	6	1	3	8	1
7	Bombay City ...	1	1	1	1	32	41	72	78	75	68
	Central Registration District										
8	Ahmednagar ...	15	8	1,346	14	1	4	...	3	3	2
9	Poona	20	10	1,157	15	6	13	4	7	4	5
10	Sholápur	10	7	718	19	8	10	6	8	7	3
11	Sátára	19	11	1,342	21	5	4	9	5	4	2
12	Ratnágiri	15	11	1,305	72	43	32	15	27	27	9
	Southern Registration District										
13	Belgaum	15	11	1,069	51	12	10	10	30	19	22
14	Dhárwar	18	8	1,277	13	...	1	4	4	3	2
15	Bijápur	13	10	1,128	29	20	14	7	7	8	8
16	Kánara	16	10	1,264	42	30	24	42	20	18	18
	Gujarát Registration District										
17	Surat	12	12	782	54	22	65	189	164	143	66
18	Broach	9	5	404	12	2	...	2	3	5	2
19	Kaira	15	1	579	1	...	3	...	...	...	...
20	Panch Mahális ...	7	7	668	31	2	12	8	20	17	21
21	Ahmedabad	13	6	871	11	5	16	22	24	22	8
	Sind Registration District										
22	Karáchi	16	13	793	88	66	89	41	63	48	27
23	Hyderabad	11	9	862	19	4	21	8	13	26	15
24	Thar and Párkar ...	13	10	904	82	37	17	36	40	33	11
25	Nawábsháh	9	8	731	46	11	18	8	14	48	19
26	Lárkána	15	13	763	60	40	6	53	36	48	20
27	Sukkur	12	7	671	4	10	3	4	5	27	1
28	Upper Sind Frontier .	6	3	410	4	2	3	4	...	4	2
	Total for the Presidency.	335	225	26,546	834	414	446	632	644	664	466

N.B.—Small-pox should *not* include Measles, Chicken-Pox, etc.

DISTRICTS *of the* BOMBAY PRESIDENCY *during each month of the year 1926*

July.	August.	September.	October.	November.	December.	6 Total. Male.	6 Total. Female.	6 Total. Total.	7 Number of these Deaths among Children. Under 1 year.	7 Number of these Deaths among Children. Under 10 years.	8 Ratio of Deaths per 1,000 of Population. Male.	8 Ratio of Deaths per 1,000 of Population. Female.	8 Ratio of Deaths per 1,000 of Population. Total.	9 Mean ratio per 1,000 of previous five years.	10 No.
19	9	...	1	2	15	117	133	250	87	115	·21	·25	·23	·41	1
...	...	...	...	...	...	3	4	7	4	3	·01	·01	·01	·69	2
5	3	2	1	1	10	54	48	102	18	76	·12	·12	·12	·30	3
9	3	1	..	...	...	37	47	84	22	50	·09	·13	·11	·26	4
3	3	..	..	...	5	14	11	25	3	13	·16	·17	·17	·14	5
3	2	...	...	...	1	16	11	27	3	23	·06	·04	·05	·35	6
46	15	11	10	10	18	269	207	476	84	216	·36	·52	·41	·47	7
3	3	...	2	1	1	14	9	23	2	4	·04	·02	·03	·08	8
5	7	1	2	2	14	36	34	70	27	29	·07	·07	·07	·31	9
1	3	1	3	1	2	20	33	53	16	19	·05	·09	·07	·24	10
...	1	...	3	1	9	25	18	43	11	20	·05	·03	·04	·09	11
15	31	10	11	7	11	120	118	238	53	117	·23	·19	·21	·25	12
4	5	6	1	1	5	66	59	125	32	27	·14	·13	·13	·08	13
3	2	1		4	5	11	18	29	6	13	·02	·04	·03	·07	14
5	1	...	...	...	1	32	39	71	25	27	·08	·09	·09	·07	15
13	6	6	1	4	3	105	80	185	34	63	·51	·41	·46	·31	16
17	5	7	...	20	62	368	402	770	298	413	1·09	1·19	1·14	·19	17
4	5	...	...	...	...	8	15	23	11	10	·05	·10	·07	·25	18
...	...	...	...	...	...	1	2	3	...	2	·00	·01	·00	·13	19
3	...	..	...	...	...	41	42	83	26	42	·24	·23	·22	·07	20
1	...	...	...	...	...	45	47	92	23	60	·10	·11	·10	·30	21
7	2	1	4	3	1	198	154	352	37	90	·65	·67	·66	·24	22
6	5	9	2	...		53	56	109	21	42	·16	·22	·19	·16	23
2	..	...	3	...	1	85	95	180	25	42	·38	·54	·45	·20	24
12	17	3	2	...	7	77	82	159	35	66	·32	·41	·38	·09	25
23	29	6	6	1	7	154	121	275	57	124	·46	·45	·46	·09	26
...	1	..	...	...	...	28	23	51	3	6	·10	·10	·10	·17	27
2	...	...	...	...	...	8	9	17	...	3	·03	·08	·07	·05	28
211	158	65	52	58	178	2,005	1,917	3,922	983	1,715	·20	·21	·20	·23	

ANNUAL FORM No. IX.—DEATHS *registered from* FEVERS *in the*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from fevers were reported.	Number in each District.	Number from which deaths from fevers were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District.										
1	East Khándesh ...	23	23	1,478	1,385	1,042	1,033	1,313	1,151	1,414	1,397
2	West Khándesh ...	10	10	1,242	1,036	776	619	692	530	598	529
3	Násik	19	19	1,667	1,510	898	957	1,457	1,043	1,093	959
4	Thána	15	15	1,546	1,352	757	578	978	756	641	593
5	Bombay Suburban.	5	5	86	63	66	84	83	63	73	57
6	Kolába	13	13	1,482	1,258	659	529	685	583	554	474
7	Bombay City ...	1	1	1	1	265	207	265	223	254	216
	Central Registration District.										
8	Ahmednagar ...	15	15	1,346	967	230	238	415	393	433	374
9	Poona	20	20	1,157	1,077	710	609	867	864	945	799
10	Sholápur	10	10	718	609	435	376	556	763	892	621
11	Sátára	19	19	1,342	1,225	690	629	815	942	1,135	1,006
12	Ratnágiri	15	15	1,305	1,073	656	540	808	660	615	539
	Southern Registration District.										
13	Belgaum	15	15	1,069	932	397	421	649	720	756	720
14	Dhárwár	18	18	1,277	1,134	966	896	998	882	901	749
15	Bijápur	13	13	1,128	1,032	575	483	669	806	1,039	822
16	Kánara	16	16	1,264	990	425	404	427	313	318	289
	Gujarát Registration District.										
17	Surat	12	12	782	671	461	459	731	639	609	585
18	Broach	9	9	404	389	377	438	485	531	514	444
19	Kaira	15	15	579	518	444	620	1,011	832	801	611
20	Panch Maháls ...	7	7	668	619	404	443	702	587	508	481
21	Ahmedabad ...	13	13	871	857	941	1,060	1,163	1,337	1,257	953
	Sind Registration District.										
22	Karáchi	16	16	793	793	592	449	520	510	423	411
23	Hyderabad ...	11	11	862	468	928	728	634	639	727	435
24	Thar and Párkar...	13	13	904	904	901	702	834	800	623	501
25	Nawabshah ...	9	9	731	731	1,030	598	597	500	515	561
26	Lárkána	15	15	763	763	1,194	798	816	608	769	556
27	Sukkur	12	12	671	671	891	695	716	744	757	554
28	Upper Sind Frontier	6	6	410	410	372	293	269	305	284	235
	Total for the Presidency ...	365	365	26,546	24,123	18,095	15,865	20,475	18,827	19,544	16,292

DISTRICTS *of the* BOMBAY PRESIDENCY *during each month of the year 1926.*

July.	August.	September.	October.	November.	December.	6 TOTAL. Male.	Female.	Total.	7 RATIO OF DEATHS PER 1,000 OF POPULATION. Male.	Female.	Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
1,364	1,846	2,491	2,221	1,613	1,133	8,848	9,060	17,908	16·22	17·10	16·66	13·41	1
539	785	1,016	889	850	666	4,075	4,414	8,489	13·16	14·55	13·85	12·32	2
932	1,014	855	985	1,051	937	6,210	5,971	12,181	14·84	14·68	14·76	11·89	3
518	659	627	557	618	600	3,916	3,971	7,887	10·08	10·77	10·42	15·55	4
114	168	59	43	81	76	485	427	912	5·54	6·68	6·02	9·56	5
573	555	557	522	535	529	3,310	3,410	6,750	11·96	12·04	12·00	15·58	6
267	305	312	318	285	244	1,687	1,464	3,151	2·24	3·70	2·74	3·35	7
454	474	462	398	403	370	2,393	2,248	4,644	6·57	6·23	6·41	8·96	8
1,001	1,031	1,033	896	764	812	5,535	4,855	10,390	11·96	9·97	10·52	10·53	9
736	767	845	810	635	569	4,183	3,882	8,065	10·04	10·81	10·37	13·77	10
1,055	1,077	1,076	1,083	1,074	913	5,931	5,564	11,495	11·60	10·82	11·20	10·57	11
633	677	733	716	524	747	3,863	4,185	8,048	7·35	6·65	6·97	8·07	12
676	619	542	558	609	560	3,656	3,574	7,227	7·54	7·68	7·61	6·27	13
628	741	762	771	1,069	1,403	5,305	5,271	10,636	10·21	10·38	10·29	9·34	14
871	841	698	820	845	688	4,597	4,580	9,177	11·35	11·72	11·52	10·31	15
343	325	303	290	342	433	2,091	2,130	4,221	10·25	10·78	10·51	11·42	16
649	789	731	691	725	611	3,717	3,952	7,669	11·02	11·73	11·38	7·75	17
432	536	574	621	516	400	2,806	3,116	5,921	17·69	20·89	19·24	12·40	18
565	779	872	850	806	601	4,455	4,337	8,792	11·73	13·03	12·37	8·51	19
474	656	787	624	472	399	3,212	3,408	6,620	16·60	18·78	17·66	10·45	20
759	1,225	1,511	1,554	1,703	1,310	7,613	7,471	15,084	16·07	18·03	16·99	12·30	21
216	270	391	455	493	510	2,947	2,323	5,270	9·74	10·18	9·93	7·81	22
311	301	372	527	798	829	4,037	3,192	7,229	12·74	12·74	12·74	10·06	23
429	258	316	758	792	825	4,167	3,578	7,745	18·84	20·41	19·54	11·72	24
325	253	275	569	869	676	3,641	2,962	6,573	15·44	16·02	15·70	11·57	25
589	495	493	764	969	822	4,940	4,033	8,973	14·90	15·12	15·01	12·36	26
590	432	534	751	903	481	4,561	3,687	8,248	16·21	16·19	16·20	14·44	27
221	160	130	327	283	255	1,676	1,455	3,131	12·47	13·68	13·01	11·18	28
16,444	18,041	19,357	20,355	20,882	18,289	113,949	108,517	222,466	11·34	11·90	11·61	10·33	

ANNUAL FORM NO. X.—DEATHS *registered from* DYSENTERY *during each month*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from Dysentery and Diarrhœa were reported.	Number in each District.	Number from which deaths from Dysentery and Diarrhœa were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District.										
1	East Khándesh ...	23	23	1,478	535	87	78	85	100	118	103
2	West Khándesh ...	10	10	1,242	263	28	35	29	37	46	51
3	Násik	19	19	1,667	513	69	66	81	72	136	141
4	Thána	15	15	1,546	255	41	17	35	37	33	29
5	Bombay Suburban ...	5	5	86	48	9	8	12	14	17	18
6	Kolába...	13	13	1,482	391	39	43	34	31	42	47
7	Bombay City	1	1	1	1	156	136	165	133	124	139
	Central Registration District.										
8	Ahmednagar	15	15	1,346	693	84	87	108	114	159	191
9	Poona	20	20	1,157	522	85	80	99	101	163	178
10	Sholápur	10	10	718	369	62	63	50	46	70	110
11	Sátára	19	19	1,342	662	74	66	83	97	103	232
12	Ratnágiri	15	15	1,305	452	78	55	65	43	46	36
	Southern Registration District.										
13	Belgaum	15	15	1,069	595	110	89	122	160	226	353
14	Dhárwár	18	18	1,277	294	73	50	64	63	72	87
15	Bijápur	13	13	1,128	495	59	60	54	75	61	105
16	Kánara	16	16	1,264	356	57	65	65	66	55	85
	Gujarát Registration District.										
17	Surat	12	12	782	205	31	44	39	67	74	92
18	Broach...	9	8	404	132	7	7	8	12	31	41
19	Kaira	15	15	579	260	30	31	49	52	80	81
20	Panch Mahális ...	7	7	668	138	8	7	10	11	17	37
21	Ahmedabad ...	13	13	971	186	36	35	40	71	70	89
	Sind Registration District.										
22	Karáchi	16	9	793	8	8	12	31	16	14	25
23	Hyderabad	11	9	902	8	9	7	6	9	12	7
24	Thar and Párkar ...	13	12	904	24	10	2	19	17	9	58
25	Nawabshah	9	7	731	5	1	2	4	1	1	8
26	Lárkána	15	6	763	4	4	1	...	...	...	3
27	Sukkur...	12	10	671	3	9	4	9	3	3	5
28	Upper Sind Frontier .	6	2	410	1	...	...	...	...	...	2
	Total for the Presidency	365	337	26,546	7,473	1,264	1,148	1,355	1,461	1,930	2,578

and DIARRHŒA *in the* DISTRICTS *of the* BOMBAY PRESIDENCY *of the year 1926*

						6			7			8	9
						TOTAL.			RATIO OF DEATHS PER 1,000 OF POPULATION.				
July.	August.	September.	October.	November.	December.	Male.	Female.	Total.	Male.	Female.	Total.	Mean ratio per 1,000 of previous five years.	No.
278	725	736	437	276	191	1,660	1,698	3,358	3·04	3·21	3·13	1·14	1
69	165	186	124	51	57	445	432	877	1·44	1·42	1·43	·44	2
214	296	279	205	161	128	979	872	1,851	2·34	2·14	2·24	1·12	3
60	103	73	52	40	52	300	269	569	·77	·73	·75	·37	4
24	55	48	36	34	37	151	161	312	1·72	2·52	2·06	1·12	5
107	205	117	74	49	64	460	392	852	1·65	1·39	1·52	·69	6
231	327	318	220	172	148	1,285	1,004	2,289	1·71	2·53	2·00	3·10	7
348	429	359	283	184	141	1,346	1,142	2,488	3·71	3·16	3·43	2·88	8
316	436	321	235	156	150	1,303	1,015	2,353	2·61	2·15	2·39	1·85	9
232	313	290	228	158	122	943	816	1,759	2·47	2·27	2·37	2·49	10
447	574	623	449	274	176	1,595	1,606	3,201	3·12	3·12	3·12	1·61	11
80	149	147	99	189	215	610	592	1,202	1·16	·93	1·04	·86	12
540	540	429	336	239	228	1,699	1,763	3,462	3·51	3·79	3·65	2·46	13
149	154	125	91	84	73	571	514	1,085	1·08	1·01	1·05	·95	14
186	253	186	178	150	87	716	751	1,467	1·77	1·92	1·84	1·83	15
242	403	276	134	91	79	825	796	1,621	4·05	4·03	4·04	2·08	16
185	236	169	101	71	73	592	579	1,171	1·76	1·72	1·74	·81	17
38	88	71	52	40	20	223	195	418	1·41	1·31	1·36	·64	18
98	213	279	193	156	59	702	612	1,314	1·85	1·85	1·85	·87	19
45	87	141	68	41	34	250	226	476	1·29	1·25	1·27	·40	20
93	224	193	132	117	85	632	557	1,189	1·33	1·34	1·34	·83	21
18	39	95	124	57	31	266	204	470	·88	·90	·89	·44	22
8	18	29	25	20	17	100	67	167	32	26	·29	·18	23
4	4	6	2	4	5	57	43	100	25	·25	·25	·05	24
1	1	1	...	...	3	14	4	18	·06	·02	·04	·02	25
...	2	3	...	4	...	9	7	16	·03	·03	·03	·03	26
...	3	7	7	9	8	37	30	67	·13	·13	·13	·15	27
1	...	...	...	3	...	1	5	6	·00	·04	·02	·01	28
4,072	6,039	5,471	3,934	2,883	2,288	17,776	16,382	34,158	1·77	1·80	1·78	1·23	

ANNUAL FORM No. XI.—DEATHS *registered from* RESPIRATORY *month of the*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from Respiratory Diseases were reported.	Number in each District.	Number from which deaths from Respiratory Diseases were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District.										
1	East Khándesh ...	23	23	1,478	980	416	426	499	393	349	313
2	West Khándesh ...	10	10	1,242	671	282	293	276	217	212	164
3	Násik ...	19	19	1,687	1,021	341	402	572	394	363	330
4	Thána ...	15	15	1,546	814	210	189	271	203	216	192
5	Bombay Suburban ...	5	4	86	53	30	32	44	36	40	36
6	Kolába ...	13	13	1,482	881	206	179	207	176	218	183
7	Bombay City ...	1	1	1	1	986	975	1,100	1,128	1,112	1,142
	Central Registration District.										
8	Ahmednagar ...	15	15	1,346	900	282	279	344	372	369	365
9	Poona ...	20	20	1,157	804	458	408	506	482	603	610
10	Sholápur ...	10	10	718	425	154	157	215	186	251	196
11	Sátára ...	19	19	1,342	599	172	128	188	216	207	203
12	Ratnágiri ...	15	15	1,305	1,015	418	426	483	463	410	352
	Southern Registration District.										
13	Belgaum ...	15	15	1,069	581	258	286	368	322	297	274
14	Dhárwár ...	18	18	1,277	694	320	305	317	311	287	271
15	Bijápur ...	13	13	1,128	756	223	197	252	240	215	197
16	Kánara ...	16	16	1,264	369	96	118	118	83	91	58
	Gujarát Registration District.										
17	Surat ...	12	12	782	747	612	606	791	676	678	617
18	Broach ...	9	9	404	334	254	275	355	323	351	271
19	Kaira ...	15	15	579	534	342	533	748	603	656	588
20	Panch Mahals ...	7	7	668	407	117	119	154	89	80	94
21	Ahmedabad ...	13	13	871	556	693	611	762	697	723	563
	Sind Registration District.										
22	Karáchi ...	16	16	793	135	412	294	213	153	138	120
23	Hyderabad ...	11	11	862	203	446	360	265	169	114	70
24	Thar and Párkar ...	13	13	904	276	310	266	209	133	53	51
25	Nawábshah ...	9	8	731	78	117	92	44	28	26	12
26	Lárkána ...	15	13	763	26	24	40	22	9	13	2
27	Sukkur ...	12	12	671	10	80	68	46	26	29	15
28	Upper Sind Frontier.	6	6	410	15	14	14	12	1	1	...
	Total for the Presidency.	365	361	26,546	13,945	8,262	7,998	9,392	8,168	8,115	7,289

DISEASES *in the* DISTRICTS *of the* BOMBAY PRESIDENCY *during each year 1926*

July.	August.	September.	October.	November.	December.	6 Totals. Male.	Female.	Total.	7 Ratio of Deaths per 1,000 of Population. Male.	Female.	Total.	Mean ratio per 1,000 of previous five years.	9 No.
370	551	619	589	536	471	2,674	2,603	5,477	5·27	4·91	5·09	3·51	1
168	254	282	232	238	240	1,453	1,335	2,788	4·69	4·40	4·55	2·93	2
380	474	406	418	469	424	2,484	2,493	4,977	5·93	6·13	6·03	4·19	3
206	295	309	251	254	229	1,572	1,247	2,819	4·05	3·38	3·72	1·71	4
71	62	66	53	86	62	327	291	618	3·73	4·55	4·08	2·13	5
215	336	338	257	269	263	1,532	1,314	2,846	5·48	4·64	5·06	2·44	6
1,414	1,352	1,103	1,075	1,021	980	7,535	5,853	13,388	10·02	14·75	11·65	14·36	7
443	422	427	393	369	403	2,282	2,186	4,468	6·26	6·05	6·18	5·61	8
619	679	600	577	585	508	3,409	3,221	6,630	6·81	6·61	6·71	6·00	9
222	254	276	255	261	282	1,204	1,415	2,709	3·38	3·94	3·65	2·90	10
223	249	268	332	316	330	1,387	1,465	2,852	2·71	2·85	2·79	1·84	11
405	452	482	467	484	538	2,593	2,487	5,380	5·51	3·85	4·67	4·25	12
323	268	337	292	312	331	1,880	1,811	3,691	3·88	3·89	3·89	3·16	13
288	283	291	277	322	310	1,811	1,774	3,585	3·43	3·49	3·46	3·21	14
232	237	217	234	252	241	1,532	1,305	2,837	3·78	3·34	3·56	3·00	15
52	50	57	57	67	74	529	392	921	2·50	1·98	2·20	1·95	16
779	784	687	575	718	732	4,363	3,892	8,255	12·94	11·55	12·24	9·98	17
299	391	298	277	275	236	1,913	1,692	3,605	12·06	11·34	11·70	8·65	18
643	869	1,019	917	875	634	4,573	3,854	8,427	12·04	11·64	11·86	8·72	19
121	113	127	148	149	129	811	638	1,449	4·19	3·52	3·87	2·82	20
493	699	856	847	810	740	4,750	3,933	8,683	10·03	9·49	9·78	8·25	21
116	131	197	212	245	269	1,431	1,099	2,530	4·72	4·82	4·77	3·67	22
53	53	96	75	128	135	1,181	788	1,969	3·72	3·14	3·47	2·24	23
9	12	12	25	28	67	707	459	1,166	3·29	2·60	2·94	1·31	24
5	3	7	3	22	25	225	154	379	·96	·84	·90	·27	25
3	9	7	8	15	26	123	55	178	·21	·37	·29	·26	26
13	12	13	15	11	33	238	123	361	·87	·55	·71	·38	27
1	1	1	1	2	2	34	16	50	·26	·16	·21	·23	28
8,202	9,495	9,421	8,863	9,117	8,717	55,143	47,895	103,038	5·49	5·25	5·38	4·53	

ANNUAL FORM No. XII.—DEATHS *registered from* PLAGUE *in the*

1	2	3		4		5					
		CIRCLES OF REGISTRATION.		VILLAGES.							
No.	Districts.	Number in each District.	Number from which deaths from Plague were reported.	Number in each District.	Number from which deaths from Plague were reported.	January.	February.	March.	April.	May.	June.
	Western Registration District.										
1	East Khándesh ...	23	14	1,478	72	323	486	356	81	3	...
2	West Khándesh ...	10	1	1,242	2	1	...	2	4	1	1
3	Násik ...	19	2	1,667	2	2	...	...	...	1	1
4	Thána ...	15	7	1,546	15	4	22	9	14	8	...
5	Bombay Suburban ...	5	2	86	2	...	...	8	5	3	4
6	Kolába ...	13	6	1,482	9	...	2	12	7	40	15
7	Bombay City ...	1	1	1	1	2	9	4	10	11	5
	Central Registration District.										
8	Ahmednagar ...	15	2	1,346	7	8	13	5	5	3	...
9	Poona ...	20	1	1,157	1	...	1	...	...	...	...
10	Sholápur ...	10	4	718	4	7	3	3	3	...	...
11	Sátára ...	19	7	1,342	100	366	370	172	58	36	17
12	Ratnágiri ...	15	1	1,305	3	1	2	1	8	45	7
	Southern Registration District.										
13	Belgaum ...	15	11	1,069	56	105	128	119	20	18	10
14	Dhárwár ...	18	16	1,277	277	909	702	246	89	44	24
15	Bijápur ...	13	8	1,128	61	138	167	62	16	3	1
16	Kánara ...	16	3	1,264	17	57	33	11	2	2	2
	Gujarát Registration District.										
17	Surat ...	12	1	782	1	...	2	...	...	...	...
18	Broach ...	9	...	401	...	...	...	...	...	...	...
19	Kaira ...	15	...	579	...	...	...	...	...	...	...
20	Panch Mahális ...	7	...	668	...	...	...	...	...	...	...
21	Ahmedabad ...	13	...	871	...	...	...	...	...	...	...
	Sind Registration District.										
22	Karáchi ...	16	1	793	1	...	2	3	5	3	13
23	Hyderabad ...	11	...	862	...	...	...	...	...	...	...
24	Thar and Párkar ...	13	...	904	...	...	...	...	...	...	...
25	Nawábshah ...	9	...	731	...	...	...	...	...	...	...
26	Lárkána ...	15	...	763	...	...	...	...	...	...	...
27	Sukkur ...	12	...	671	...	...	...	...	...	...	...
28	Upper Sind Frontier.	6	...	410	...	...	...	...	...	...	...
	Total for the Presidency ...	365	88	26,546	681	1,923	1,948	1,013	327	221	100

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Government of Maharashtra
on 22 July, 2017

DISTRICTS *of the* BOMBAY PRESIDENCY *during each month of the year 1926*

July.	August.	September.	October.	November.	December.	6 TOTAL. Male.	6 TOTAL. Female.	6 TOTAL. Total.	7 RATIO OF DEATHS PER 1,000 OF POPULATION. Male.	7 RATIO OF DEATHS PER 1,000 OF POPULATION. Female.	7 RATIO OF DEATHS PER 1,000 OF POPULATION. Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
4	...	19	15	17	4	660	644	1,304	1·21	1·21	1·21	1·65	1
...	...	...	...	...	...	5	4	9	·01	·01	·01	·04	2
...	...	...	...	...	...	4	...	4	·01	...	·00	·07	3
...	21	11	...	...	...	48	47	95	·12	·13	·13	·29	4
2	...	9	...	1	...	19	13	32	·22	·20	·21	·44	5
7	2	13	10	3	1	63	49	112	·23	·17	·20	·09	6
2	3	4	3	...	3	33	18	56	·05	·04	·05	·58	7
...	...	...	...	2	19	23	32	55	·06	·09	·08	·12	8
...	...	...	...	...	...	...	1	1	...	·00	·00	·73	9
1	...	1	1	1	3	15	8	23	·04	·02	·03	1·33	10
91	209	491	358	181	101	1,102	1,348	2,450	2·16	2·62	2·39	2·73	11
...	...	...	...	...	...	37	27	64	·07	·05	·06	·21	12
29	37	69	82	55	43	335	380	715	·69	·82	·75	1·92	13
192	367	358	546	316	178	1,930	2,039	3,969	3·65	4·01	3·83	3·06	14
20	63	76	74	101	84	412	393	805	1·02	1·00	1·01	·36	15
3	12	11	5	2	3	67	76	143	·33	·38	·36	·25	16
...	...	...	...	...	...	2	...	2	·01	...	·00	·03	17
...	...	...	...	...	...	...	...	...	...	...	...	·00	18
...	...	...	...	...	...	...	...	...	...	...	...	·00	19
...	...	...	...	...	...	...	...	...	...	...	...	·00	20
...	...	...	...	...	...	...	...	...	...	...	...	·00	21
1	...	...	...	...	...	19	8	27	·06	·04	·05	·51	22
...	...	...	...	...	...	...	...	...	...	...	...	...	23
...	...	...	...	...	...	...	...	...	...	...	...	...	24
...	...	...	...	...	...	...	...	...	...	...	...	...	25
...	...	...	...	...	...	...	...	...	...	...	...	...	26
...	...	...	...	...	...	...	...	...	...	...	...	...	27
...	...	...	...	...	...	...	...	...	...	...	...	...	28
348	714	1,060	1,094	679	439	4,779	5,087	9,866	·47	·56	·51	·72	

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